

FIG. 1

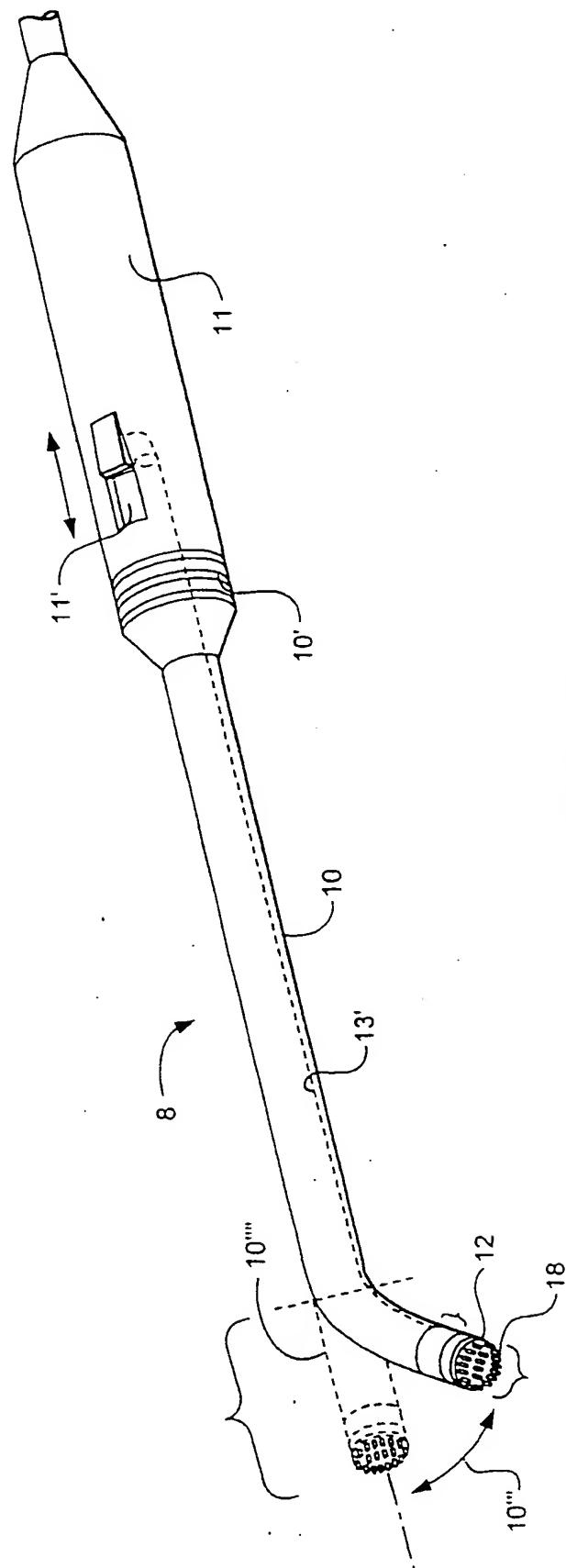


FIG. 2A

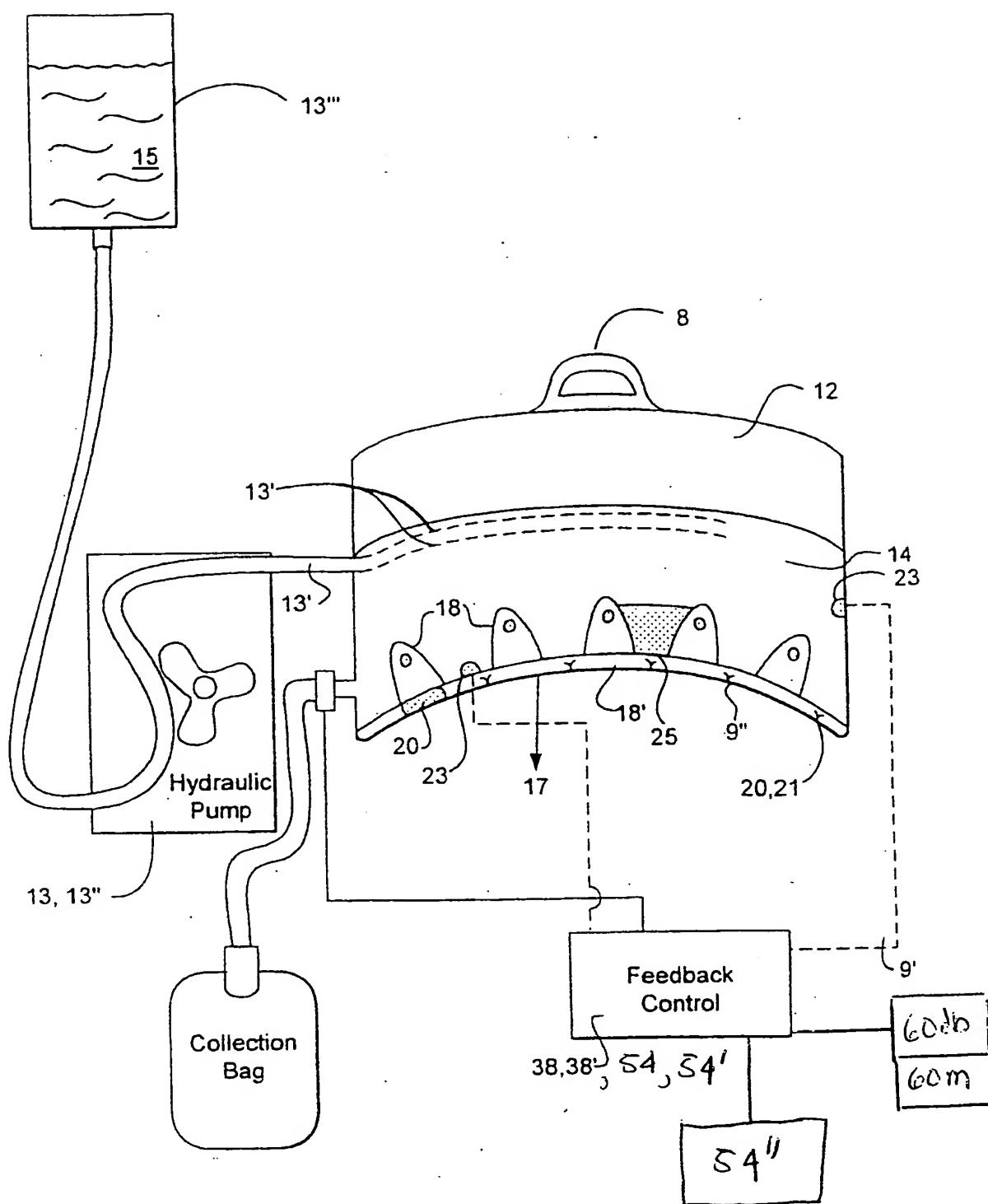


FIG. 2B

a<sub>1</sub> H — Gly — Tyr — Asp — Glu — Lys — Ser — Ala — Gly — Val — Ser — Val — Pro — Gly —  
 a<sub>2</sub> PCA — Tyr — Ser — Asp — Lys — Gly — Val — Ser — Ala — Gly — Pro — Gly — Pro —  
 a<sub>1</sub> H — Gly — Tyr — Asp — Glu — Lys — Ser — Ala — Gly — Val — Ser — Val — Pro — Gly —

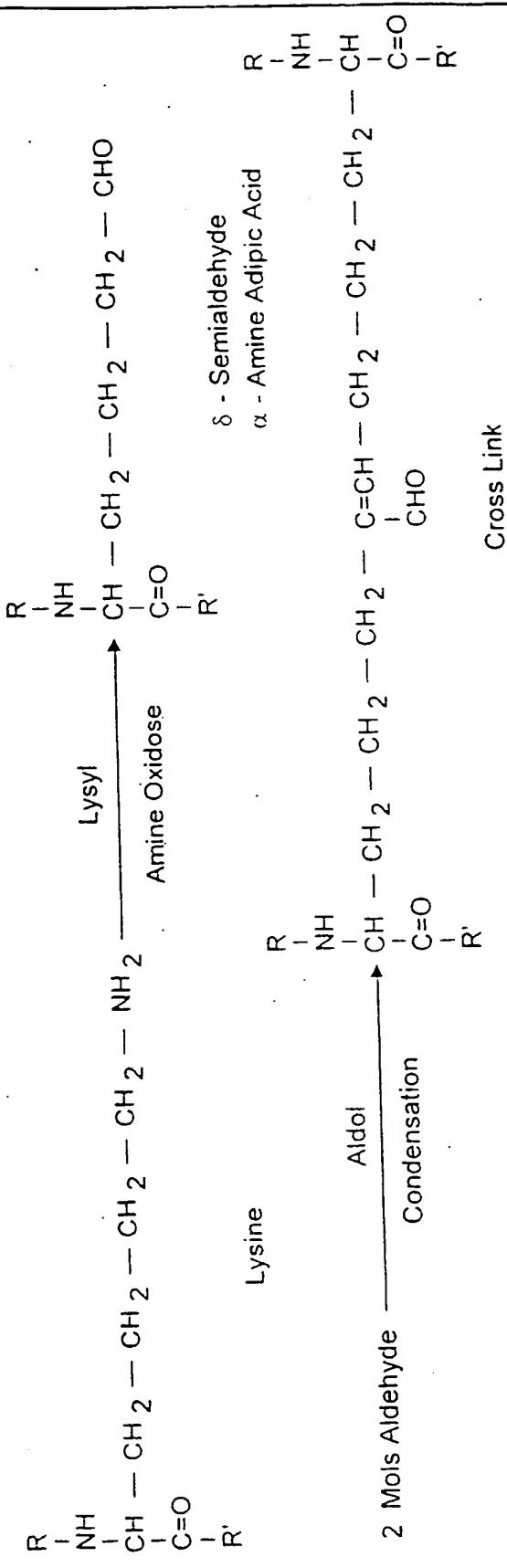


FIG. 3

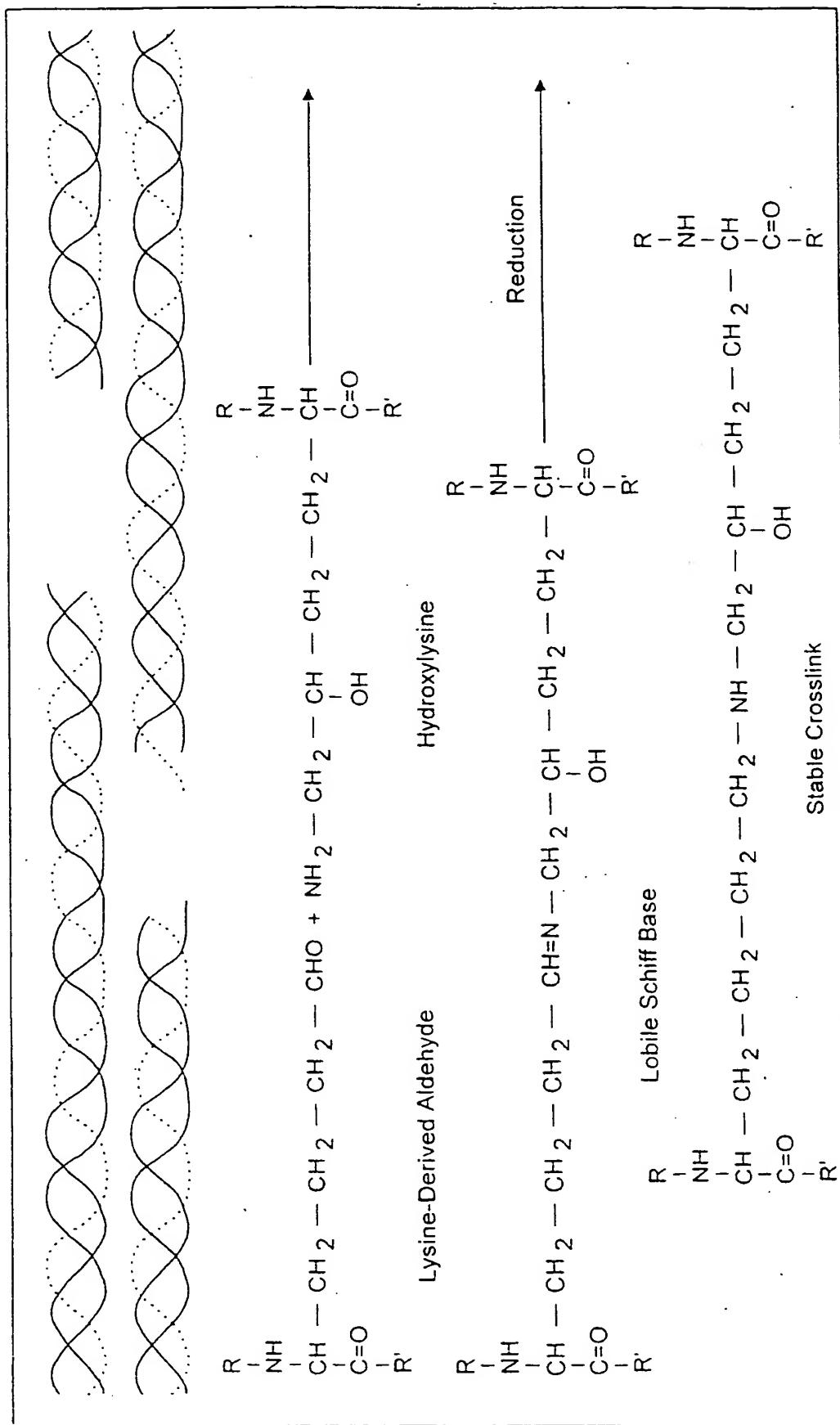


FIG. 4

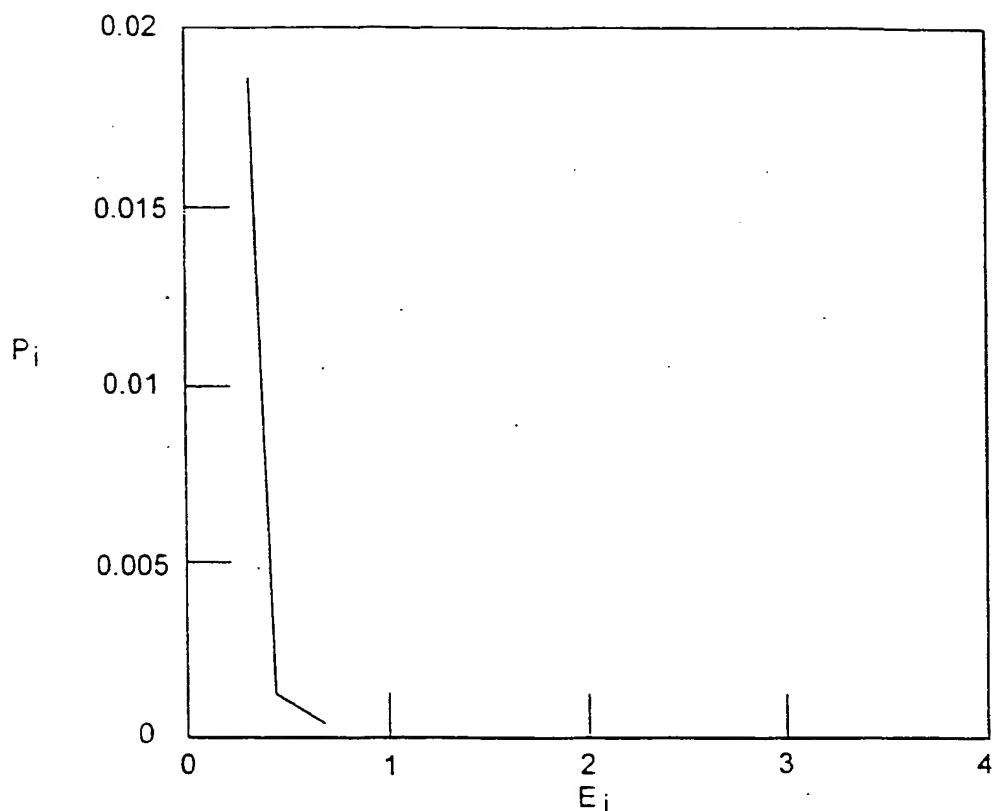


FIG. 5

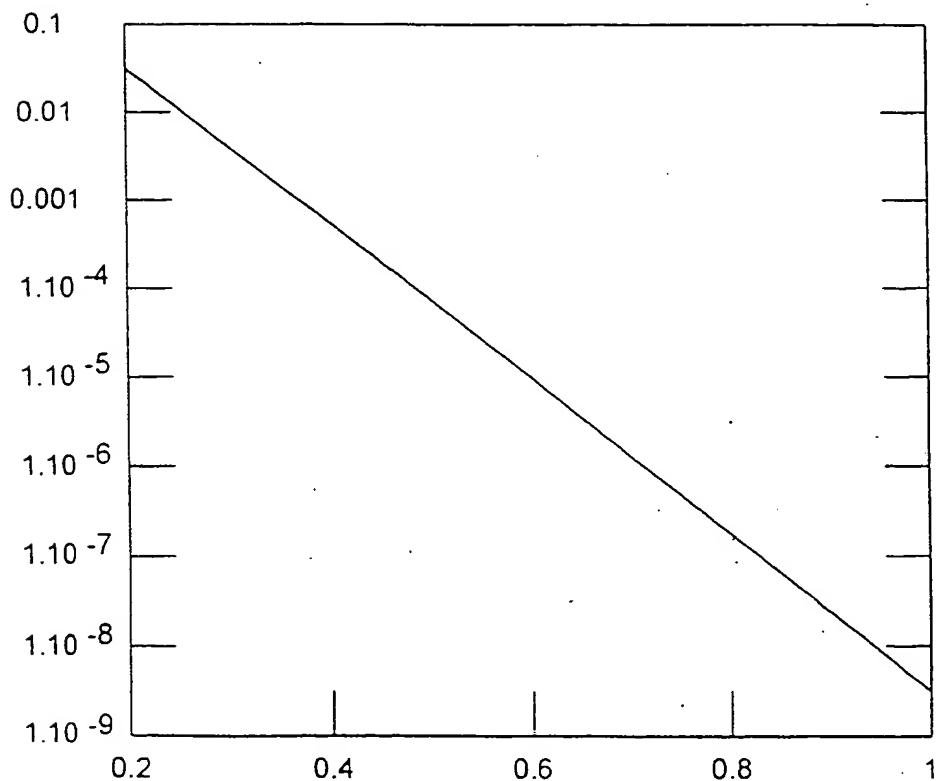


FIG. 6

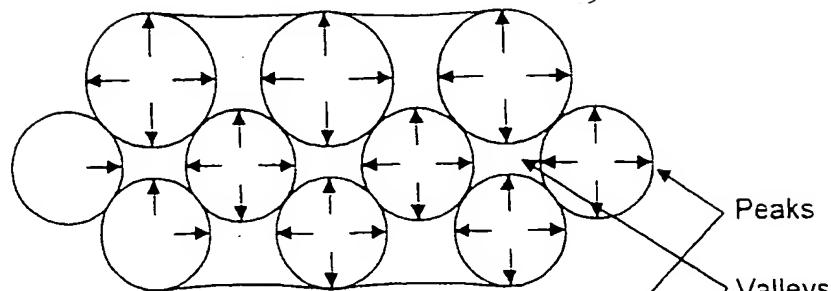


FIG. 7

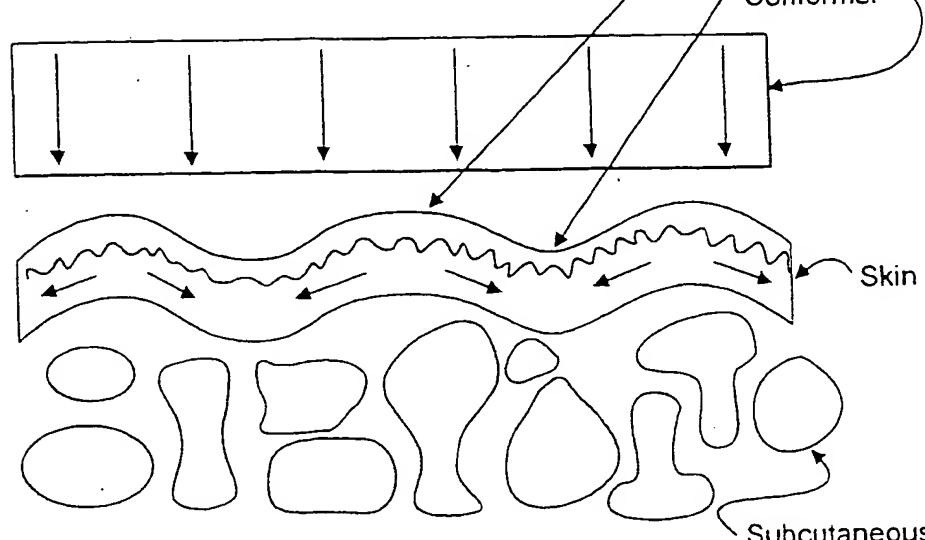


FIG. 8

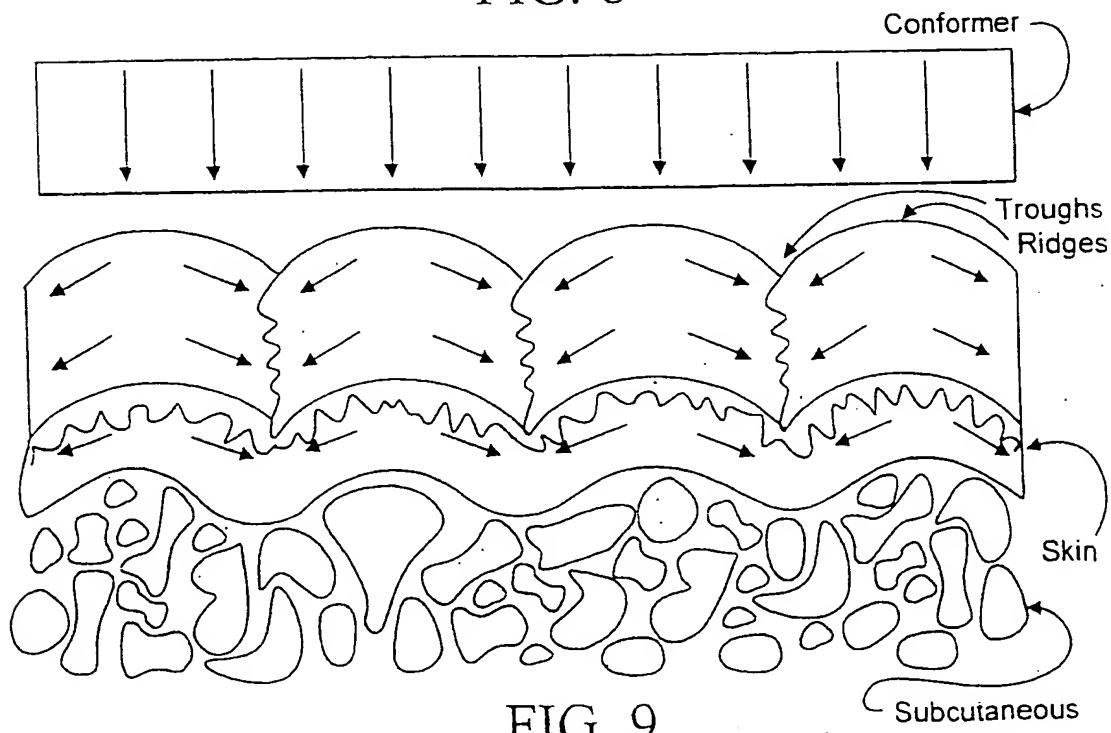


FIG. 9

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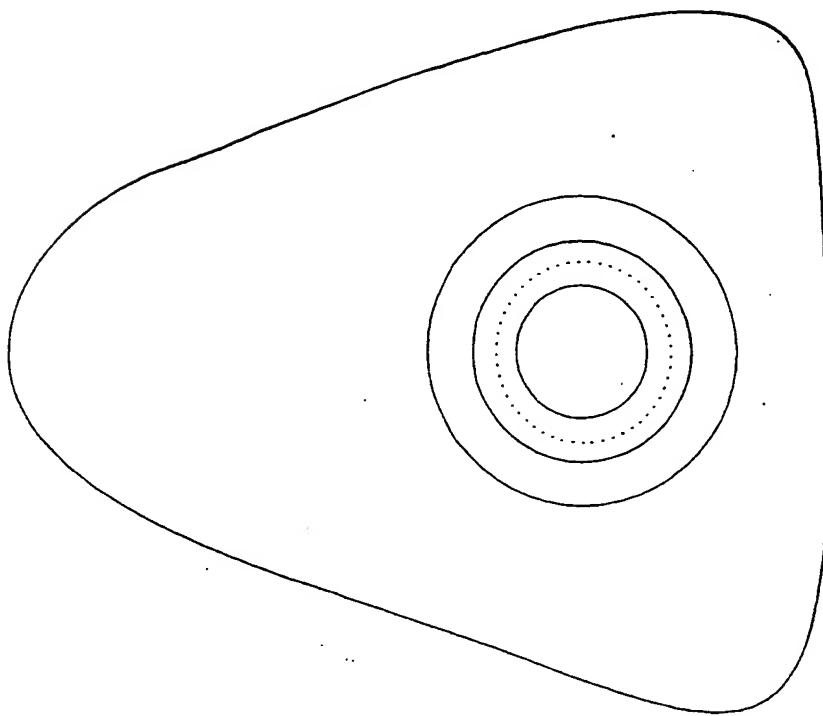


FIG. 10B

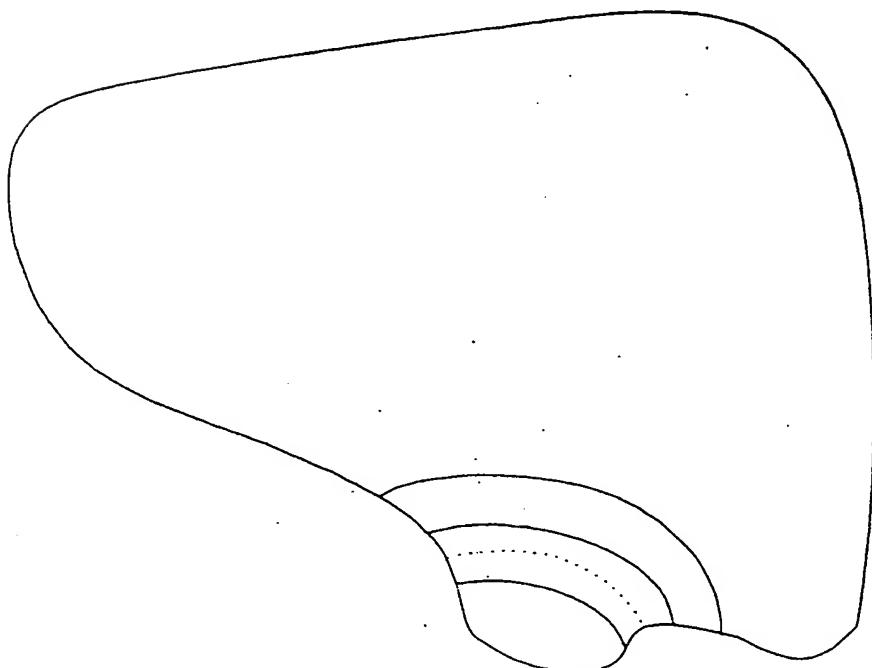


FIG. 10A

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Docket No.: 1000-010

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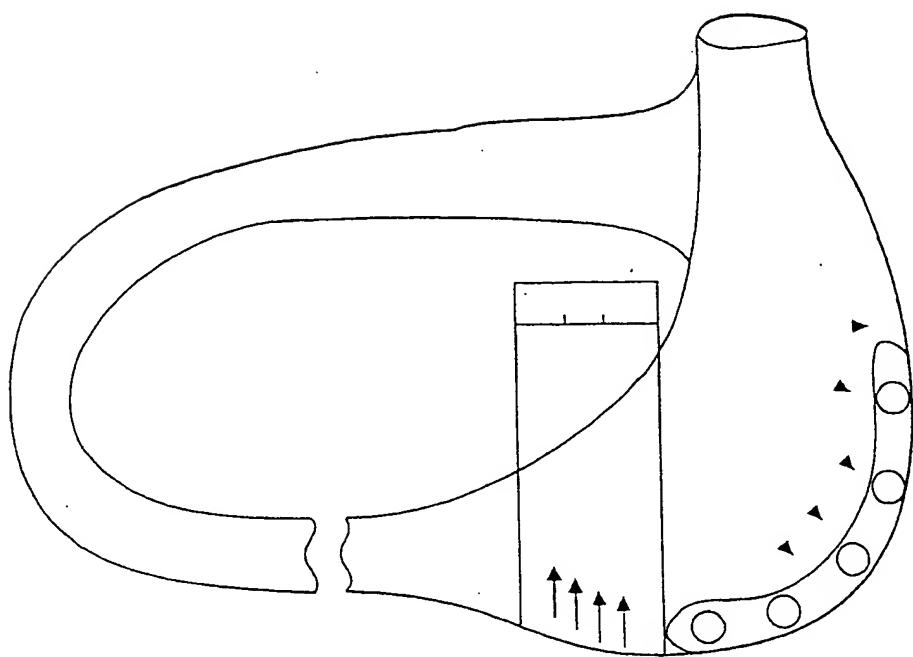


FIG. 10C

Fully Expanded

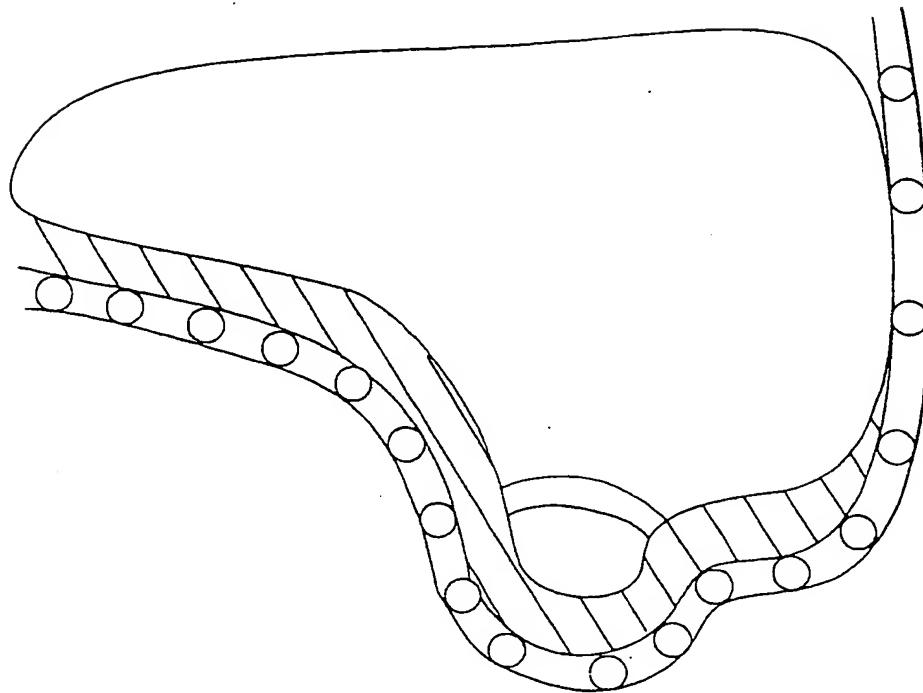


FIG. 10E

Partially Expanded

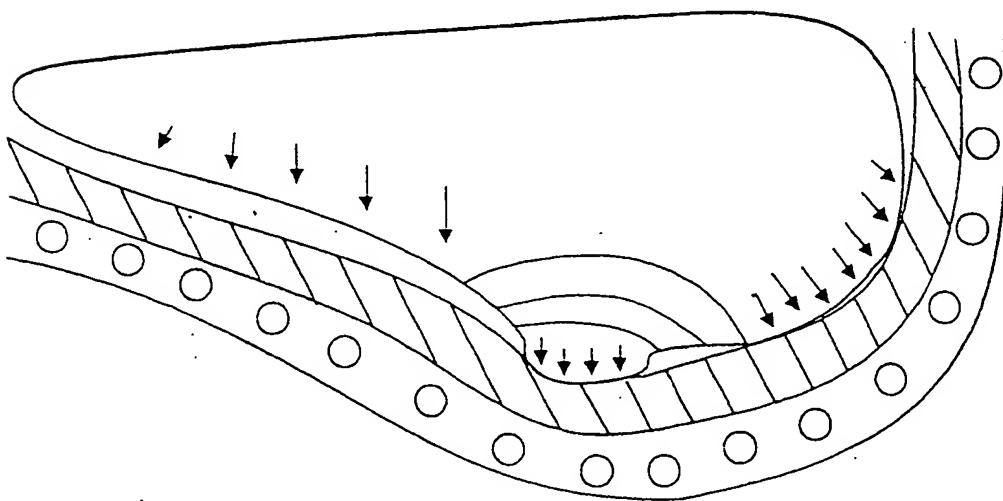


FIG. 10D

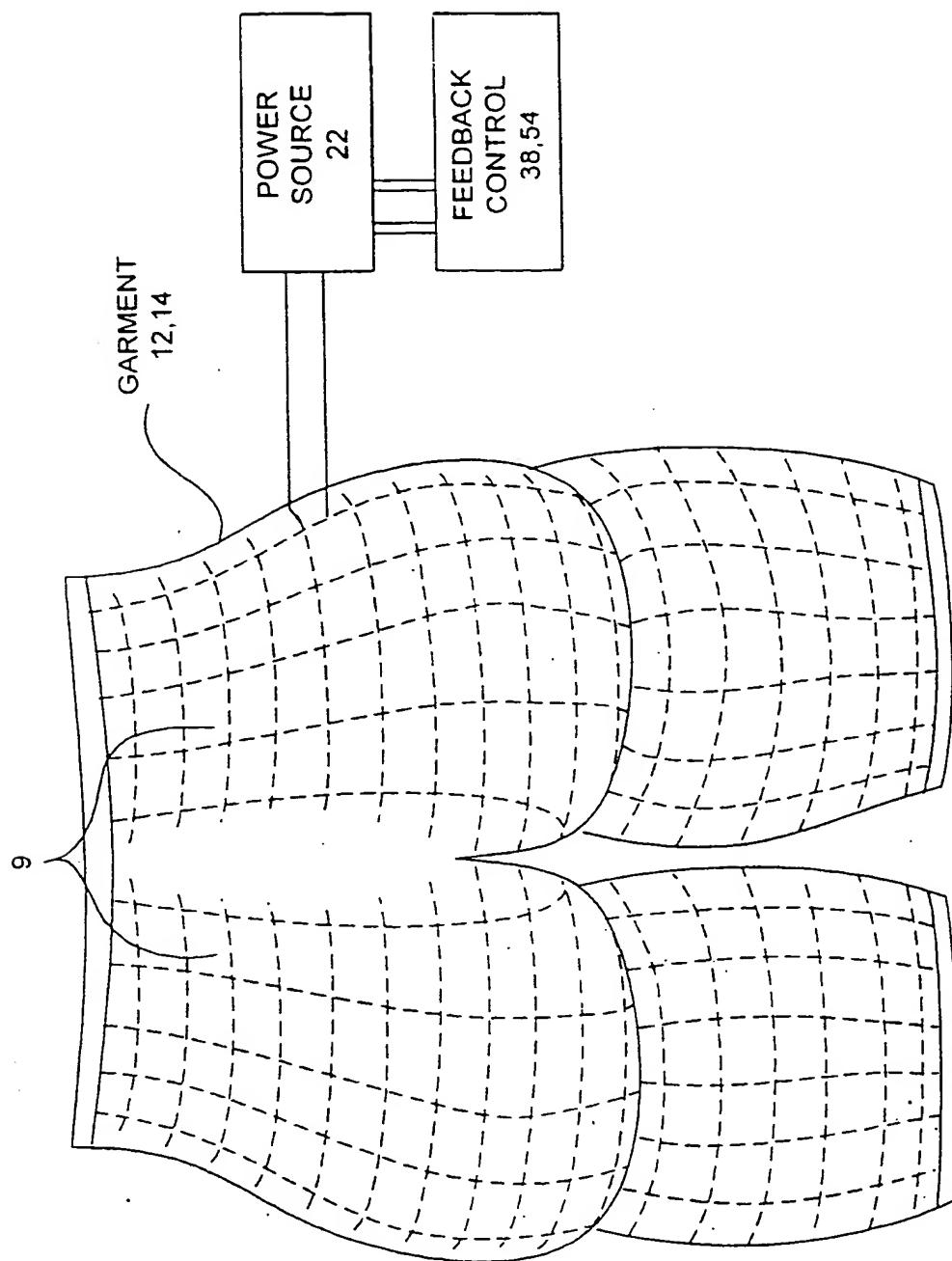


FIG. 11

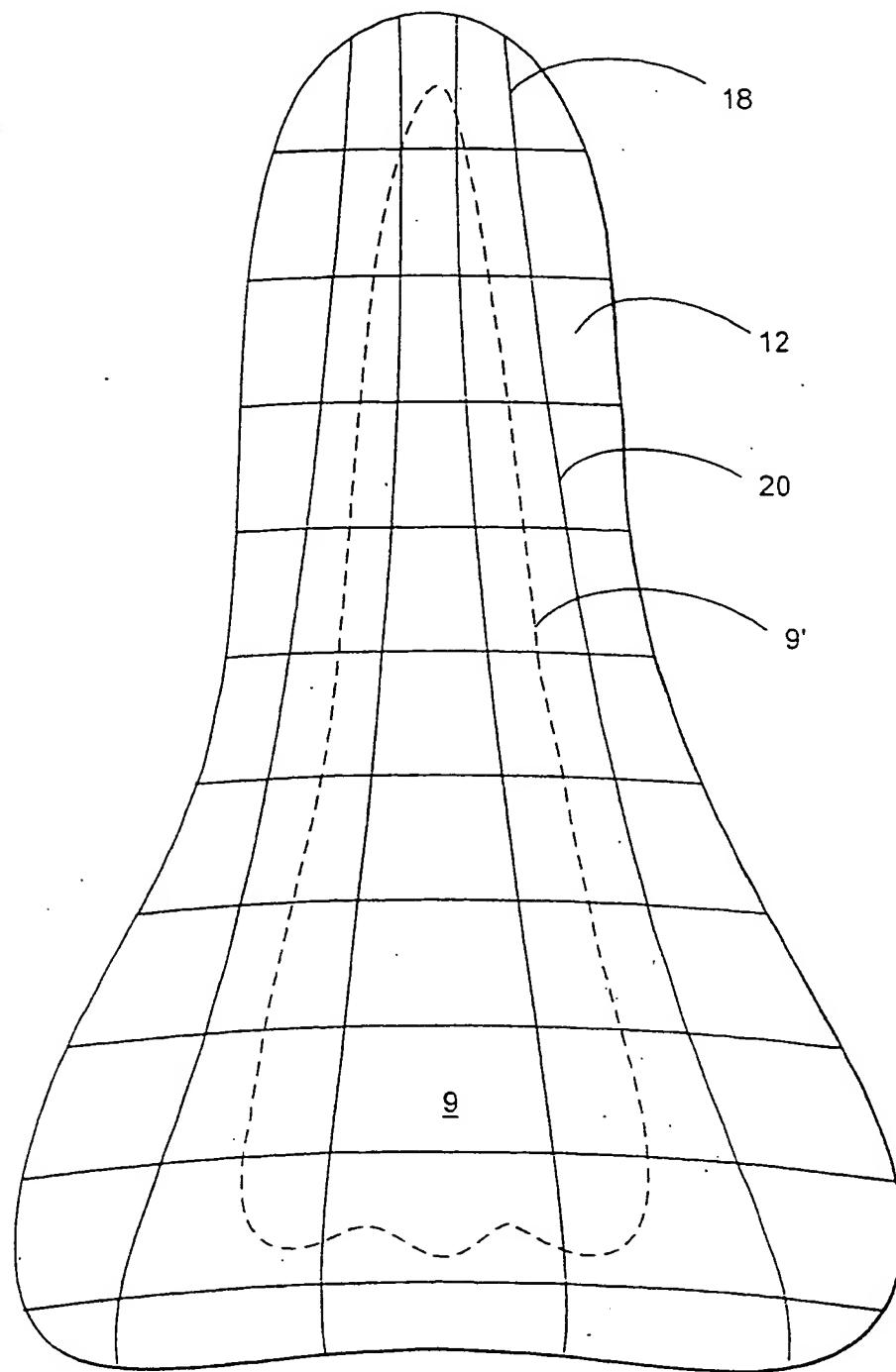


FIG. 12A

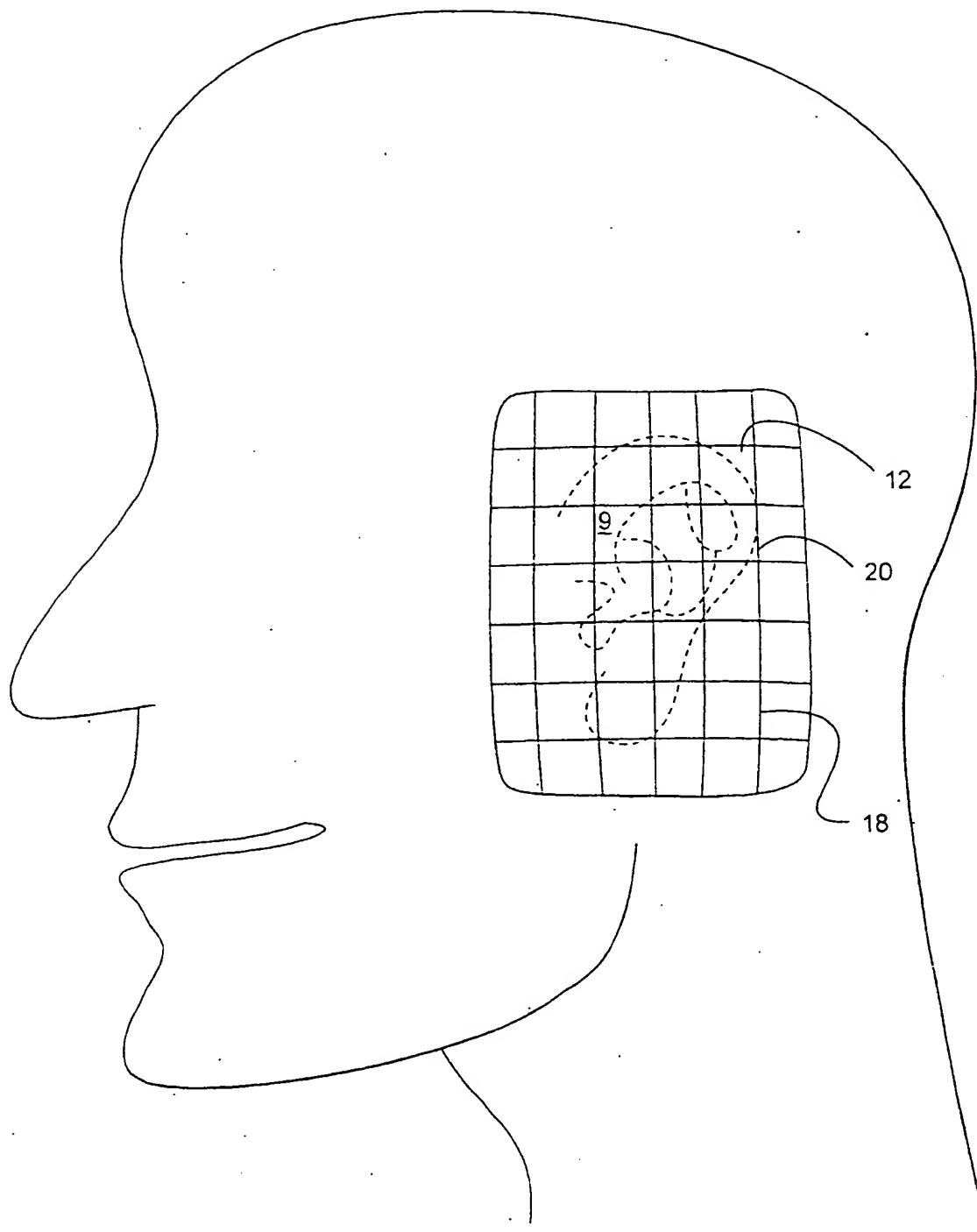


FIG. 12B

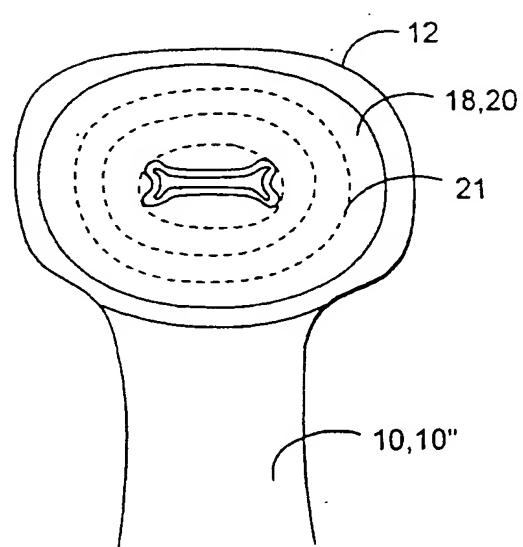
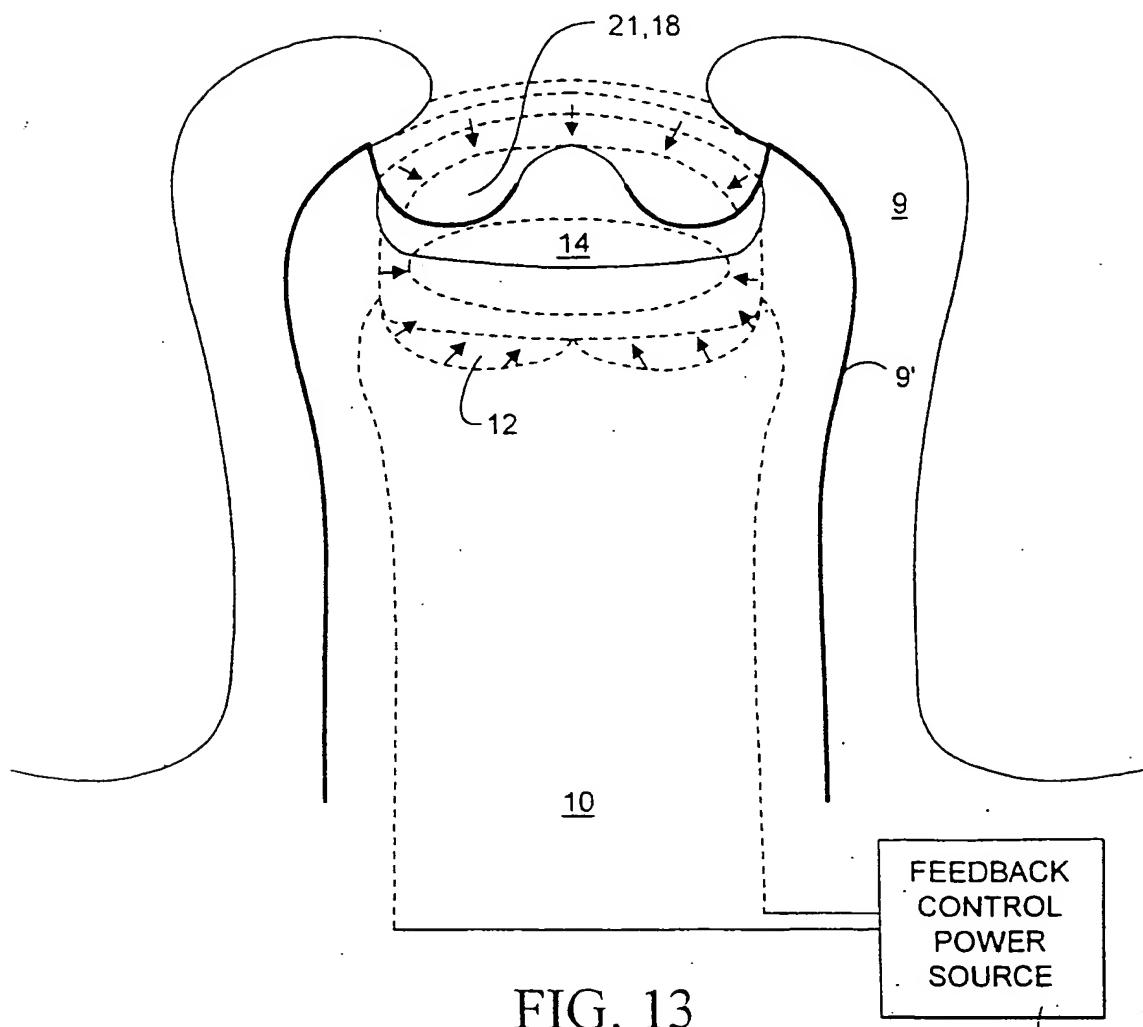


FIG. 14

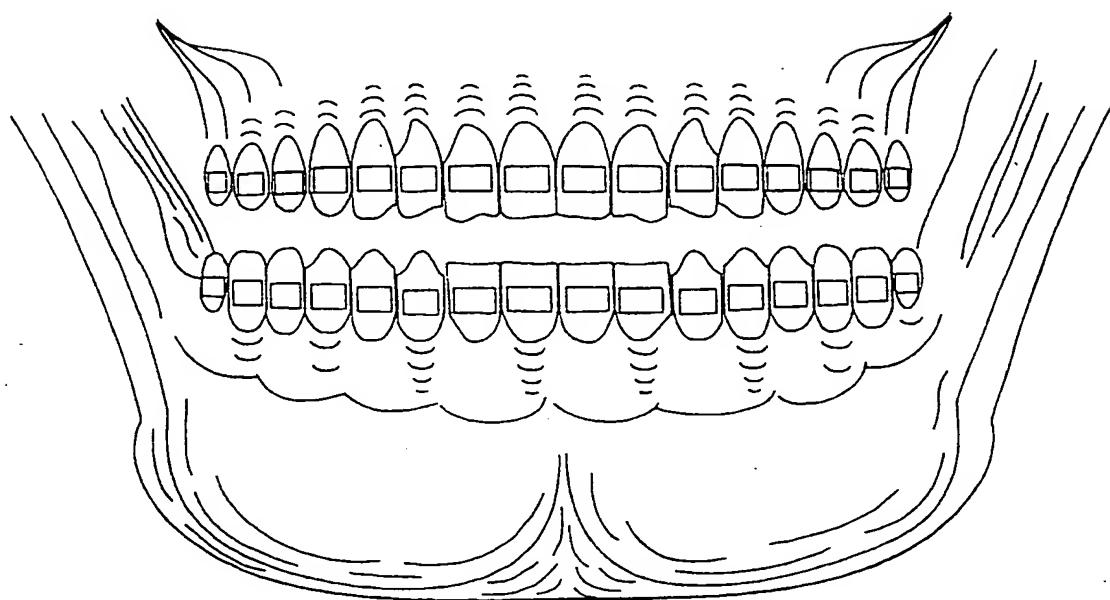


FIG. 15A

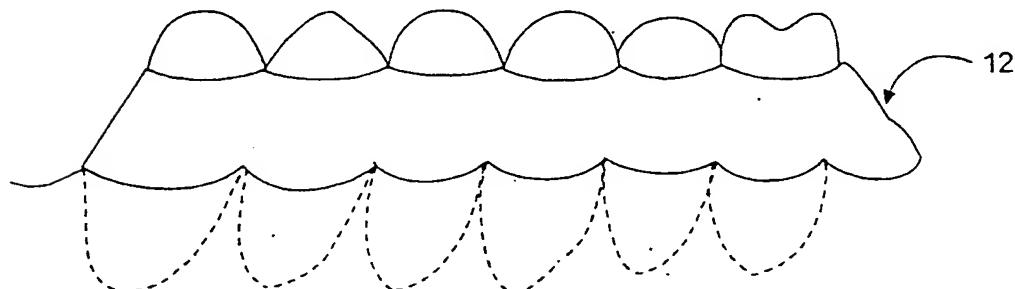


FIG. 15B

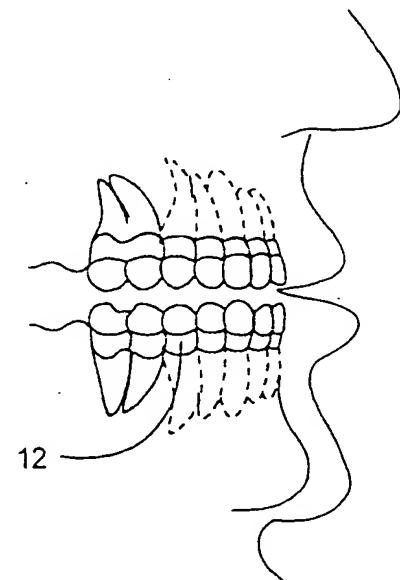


FIG. 15C

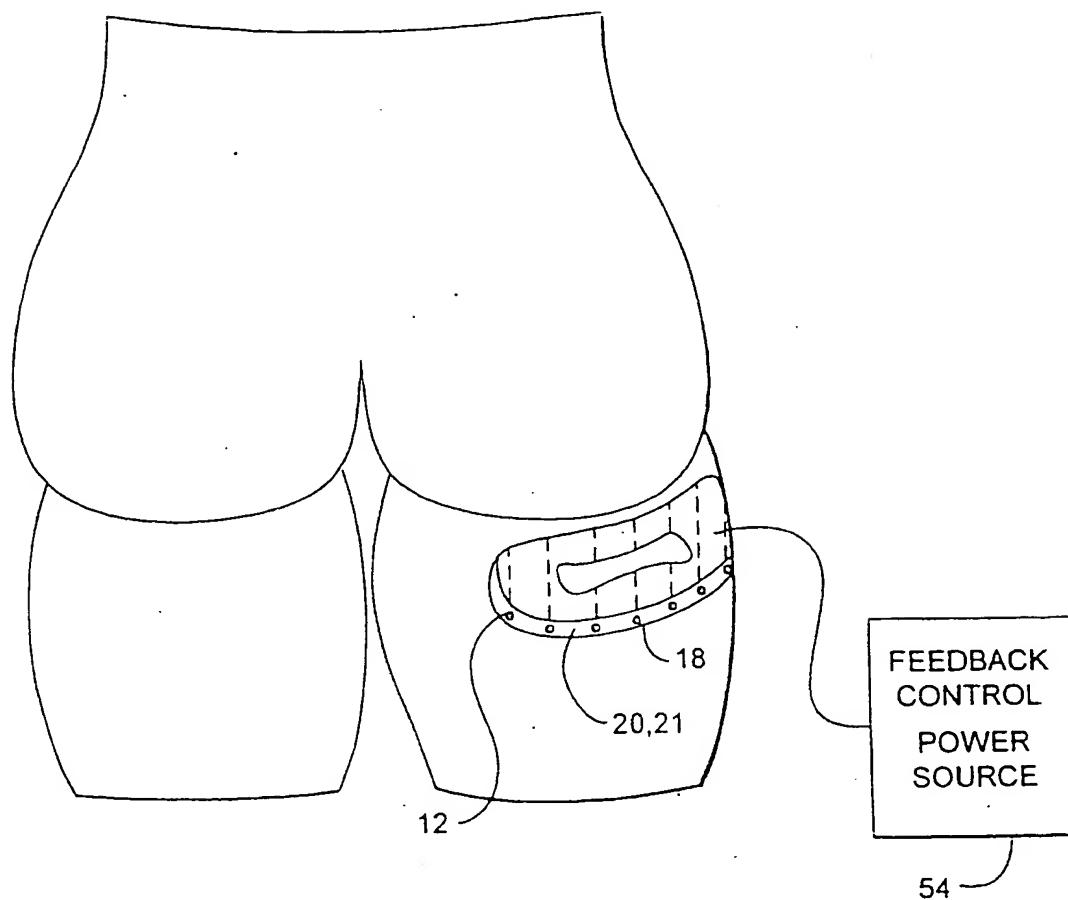


FIG. 16

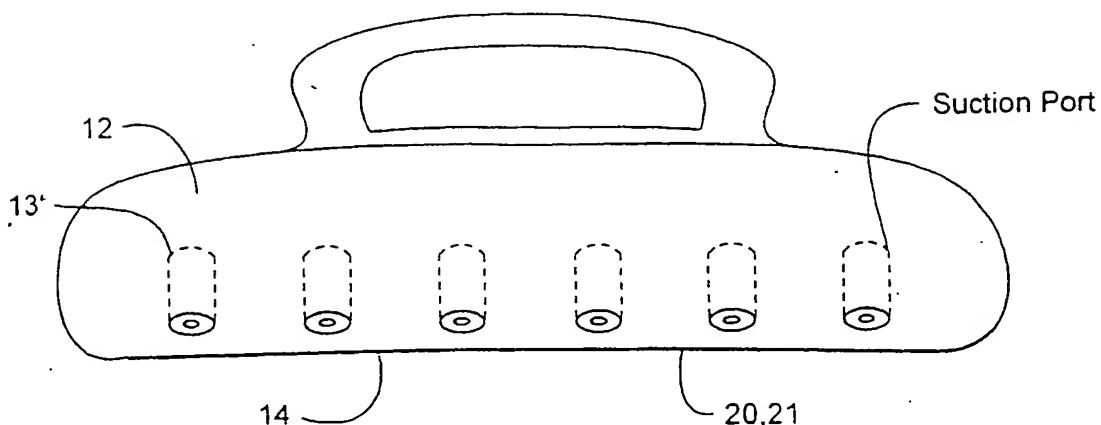


FIG. 17

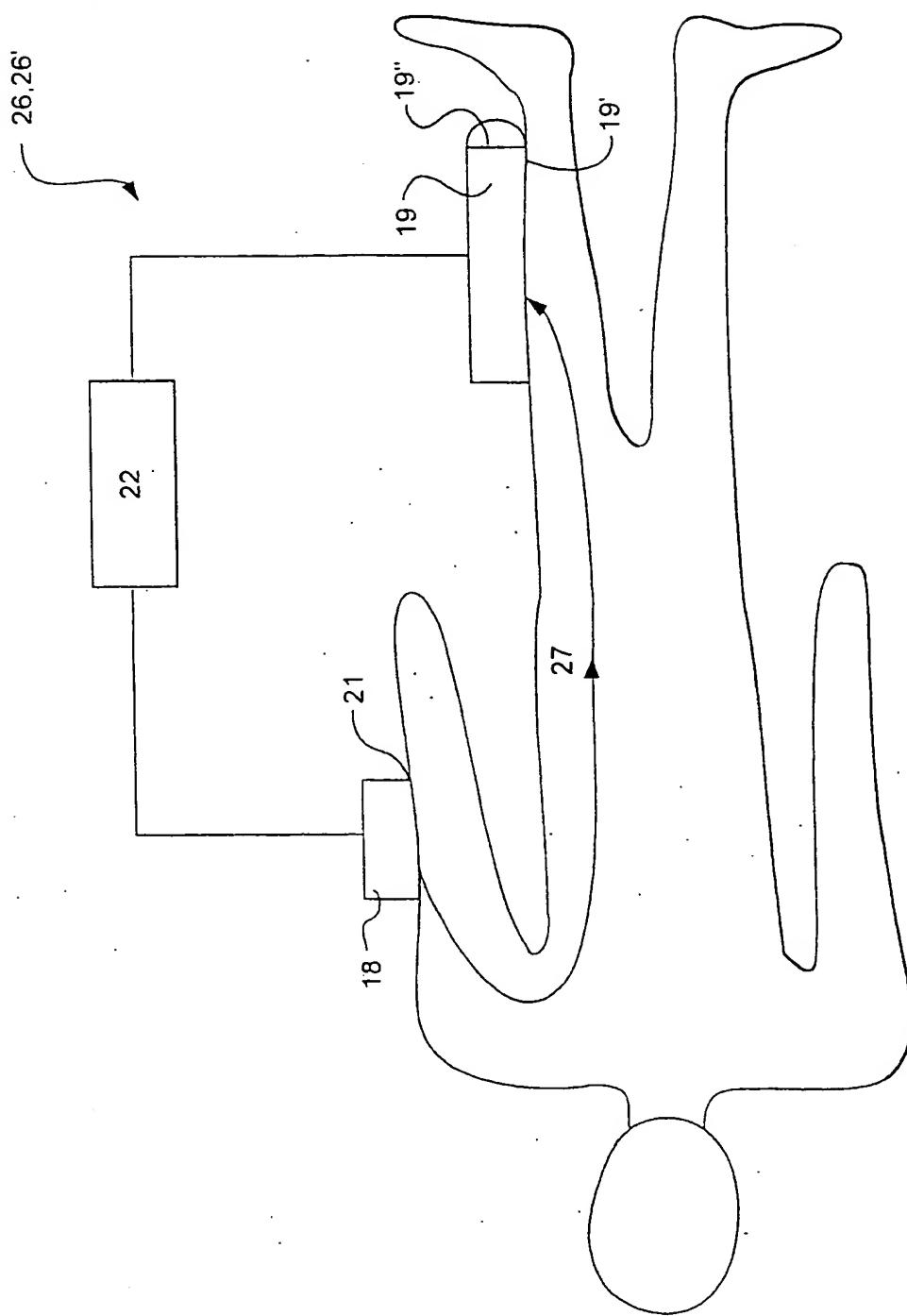


FIG. 18A

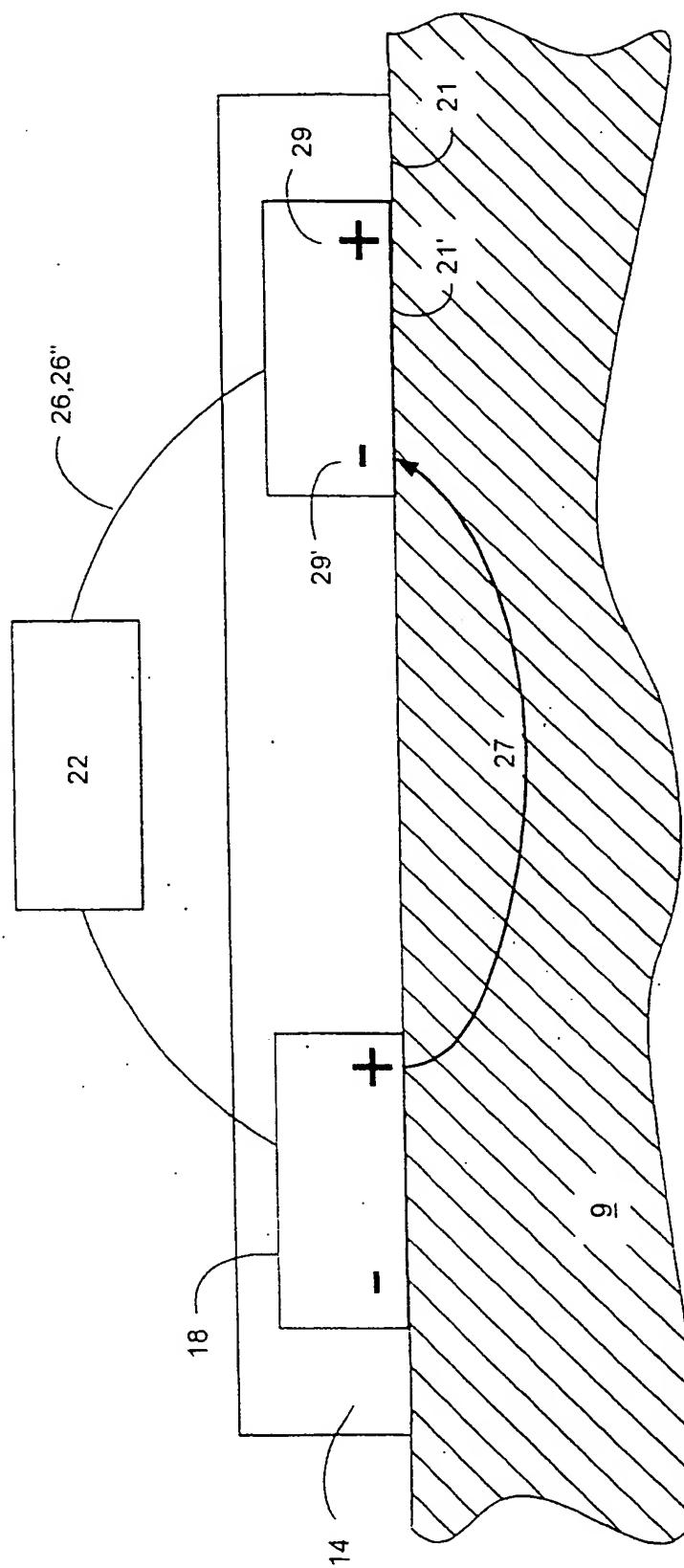


FIG. 18B

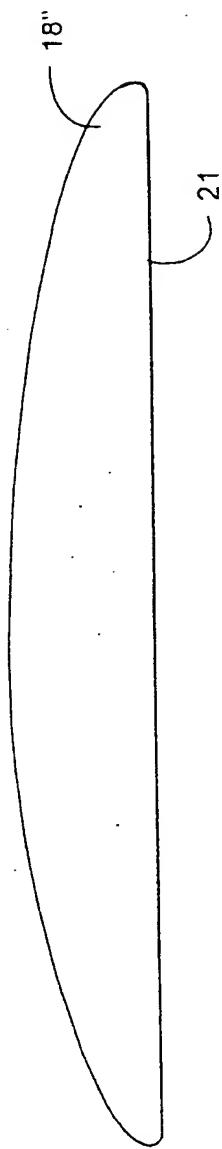


FIG. 19B

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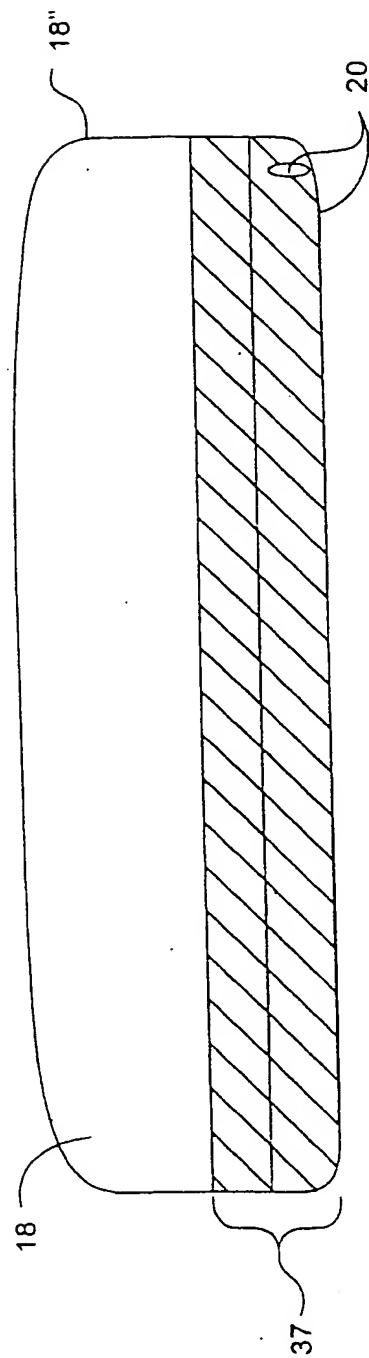


FIG. 20A

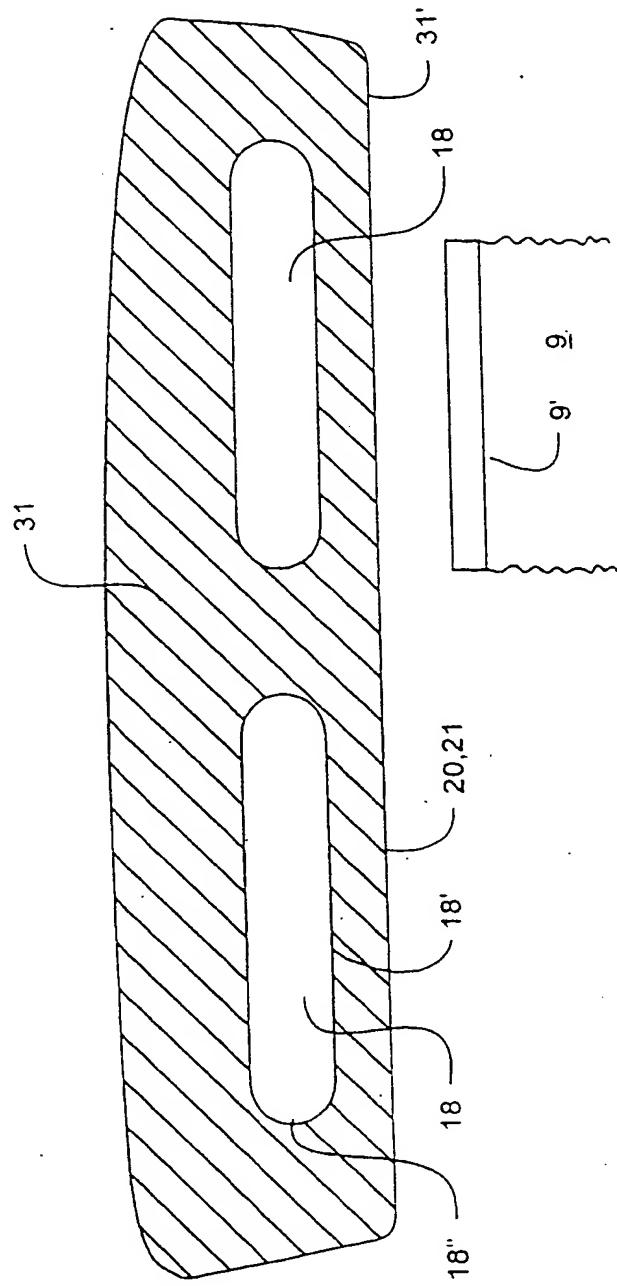


FIG. 20B

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Docket No.: 1000-010

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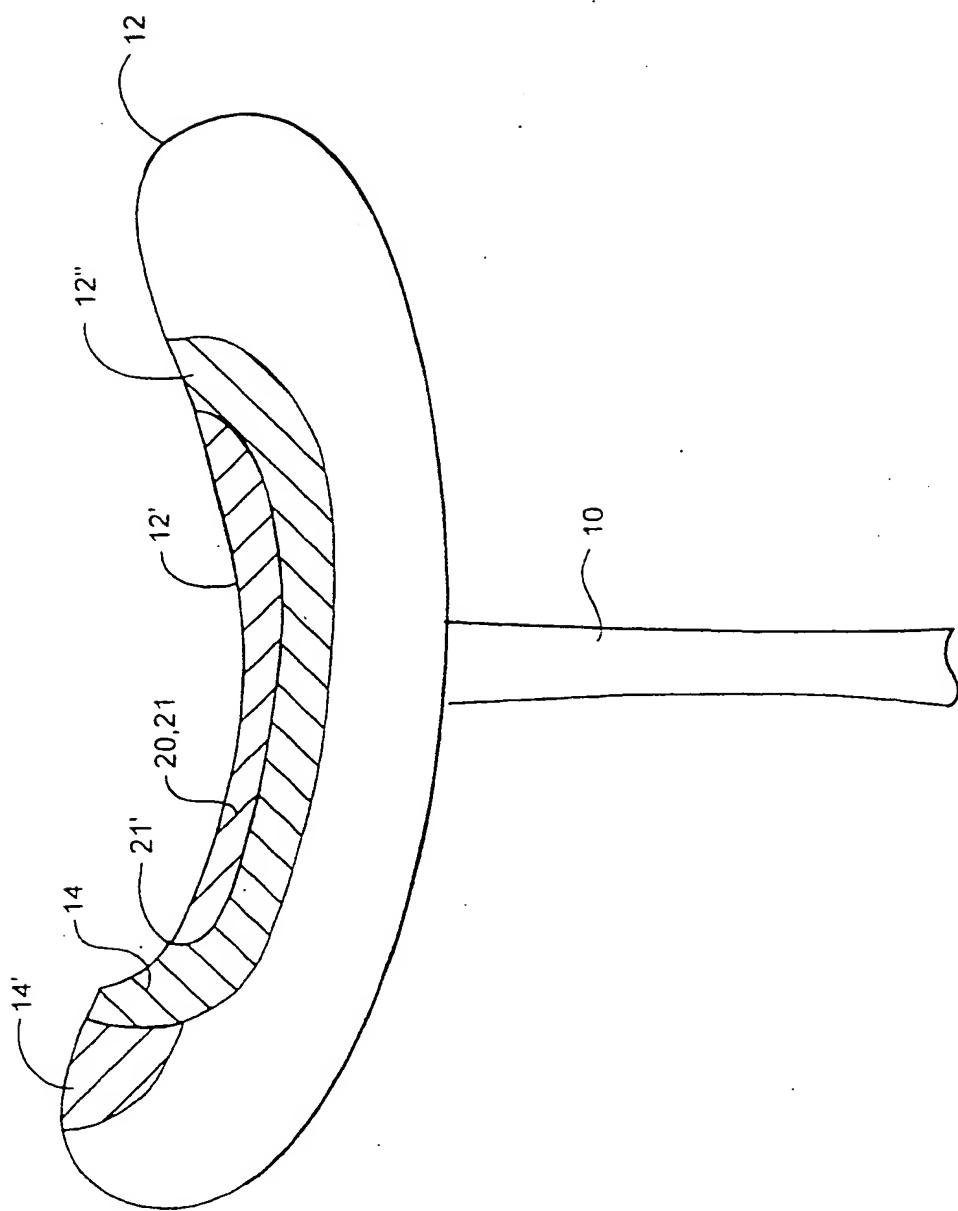


FIG. 21

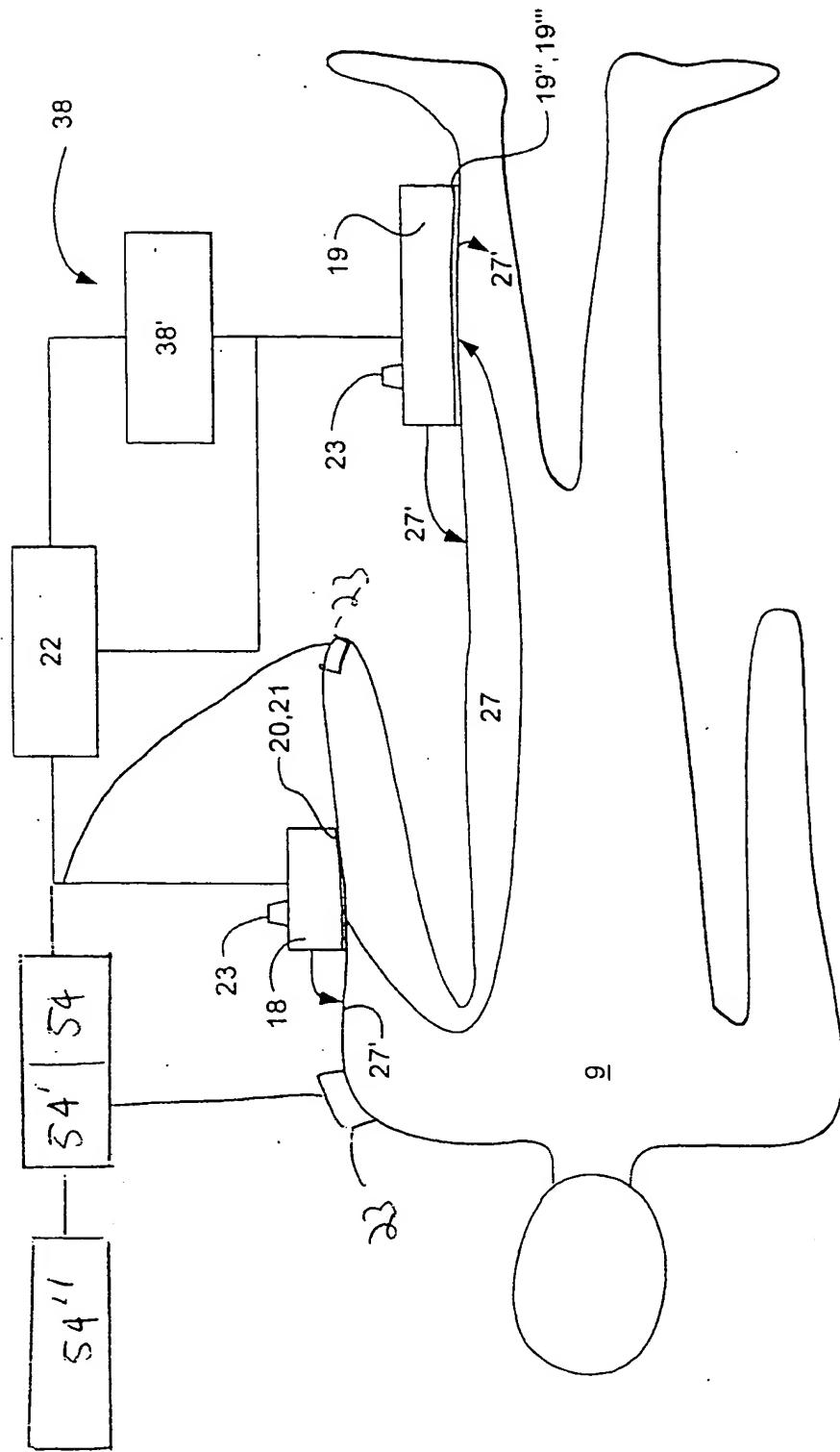
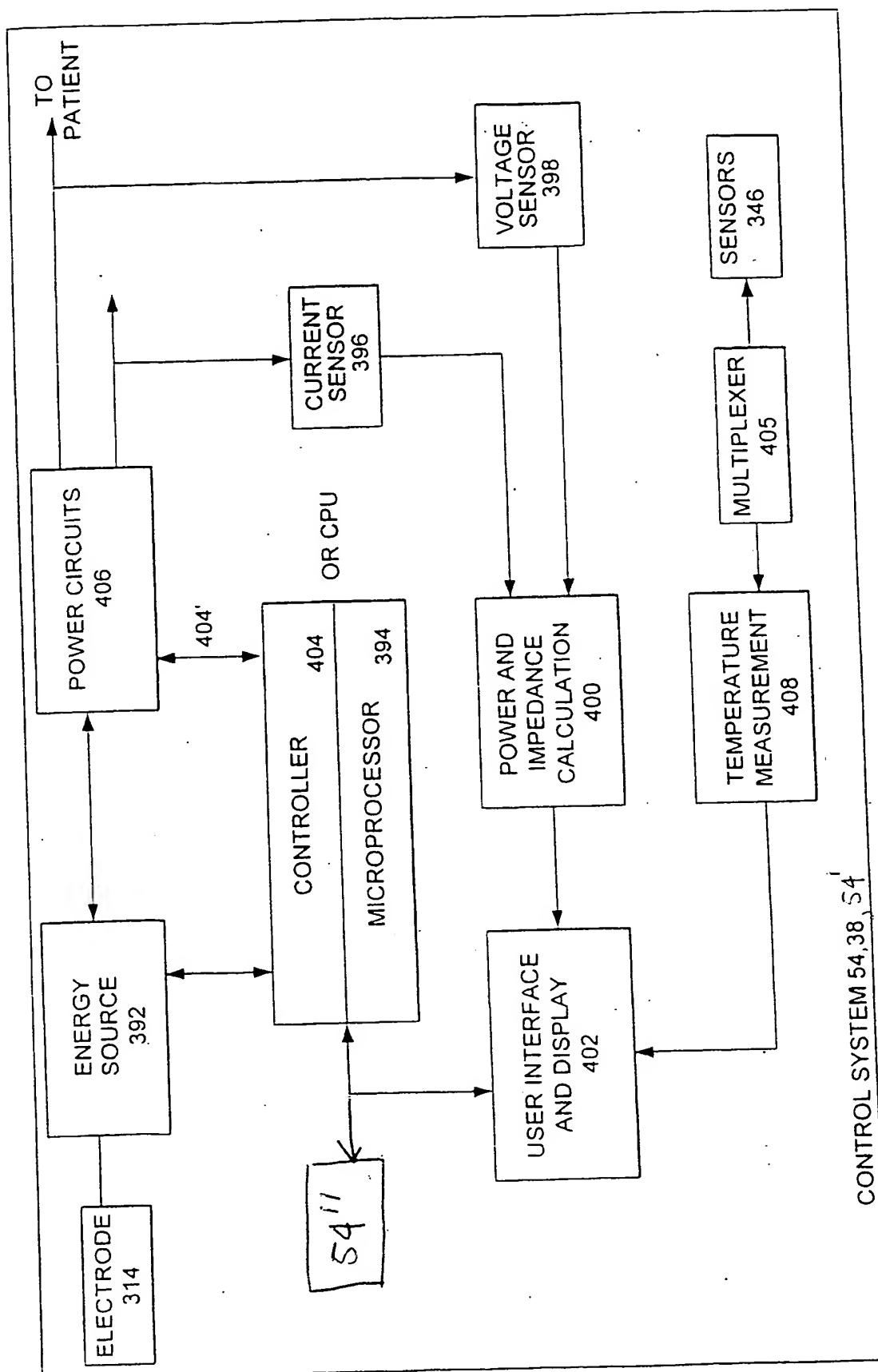


FIG. 22



CONTROL SYSTEM 54,38,54

FIG. 23

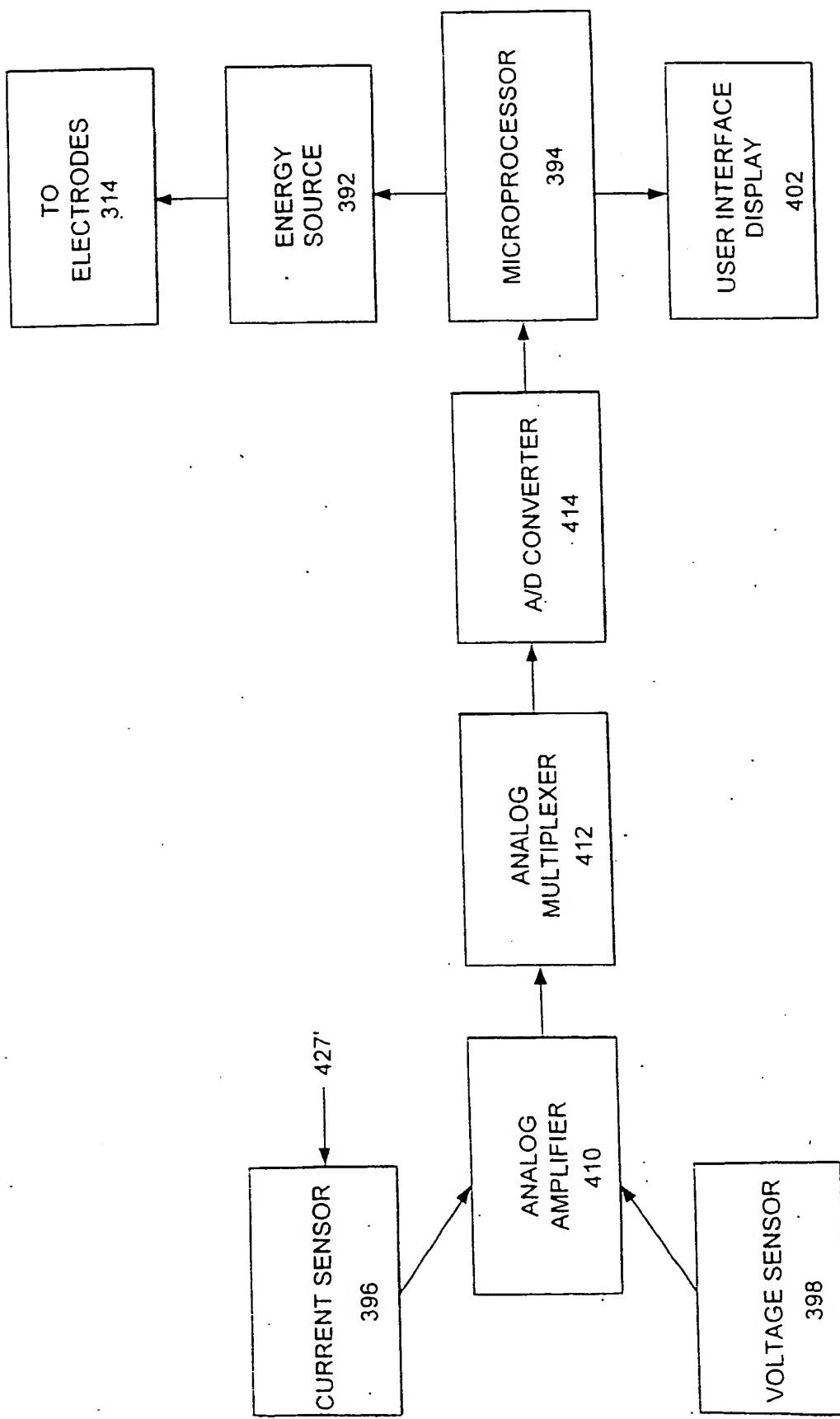


FIG. 24

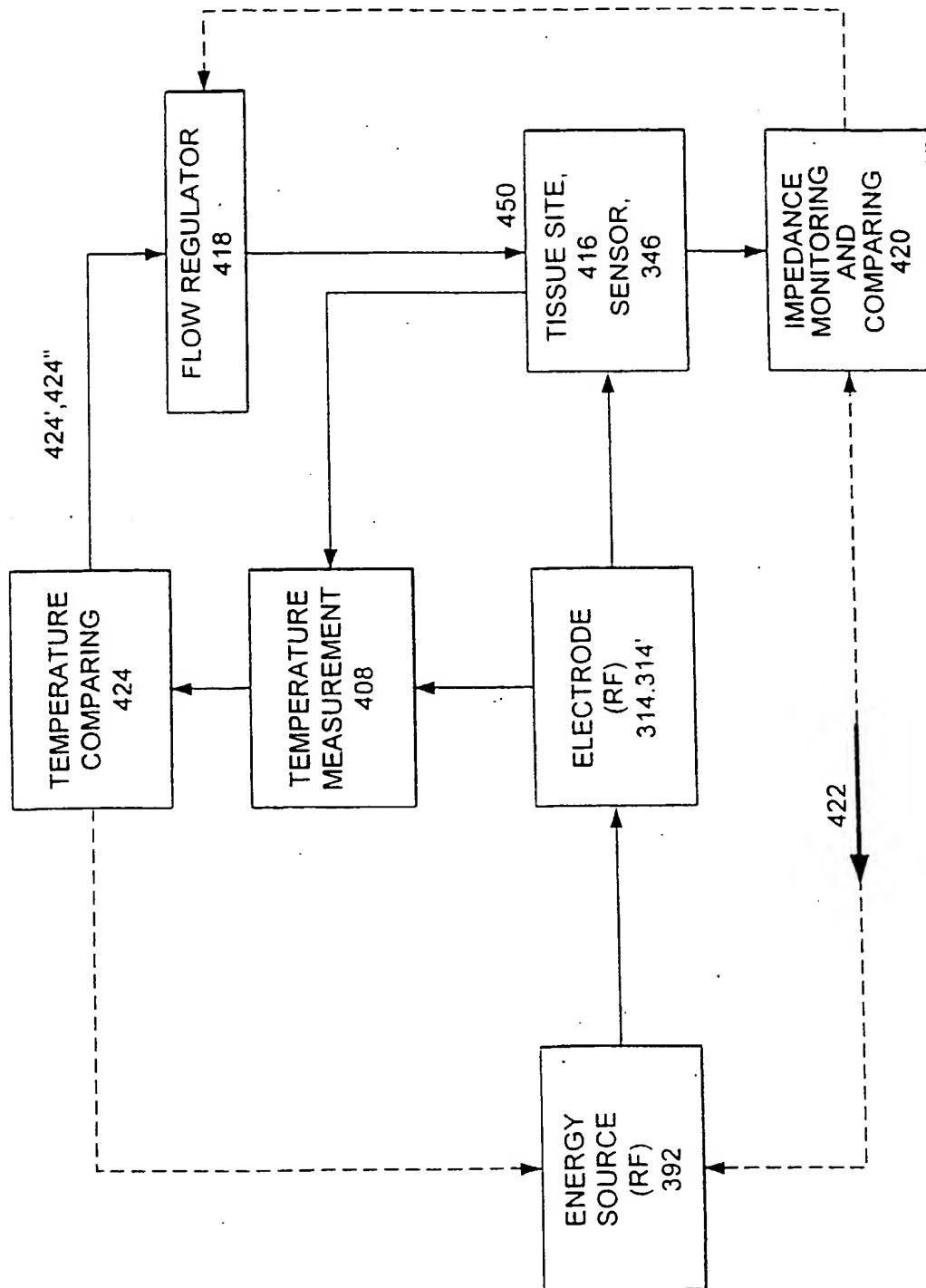


FIG. 25

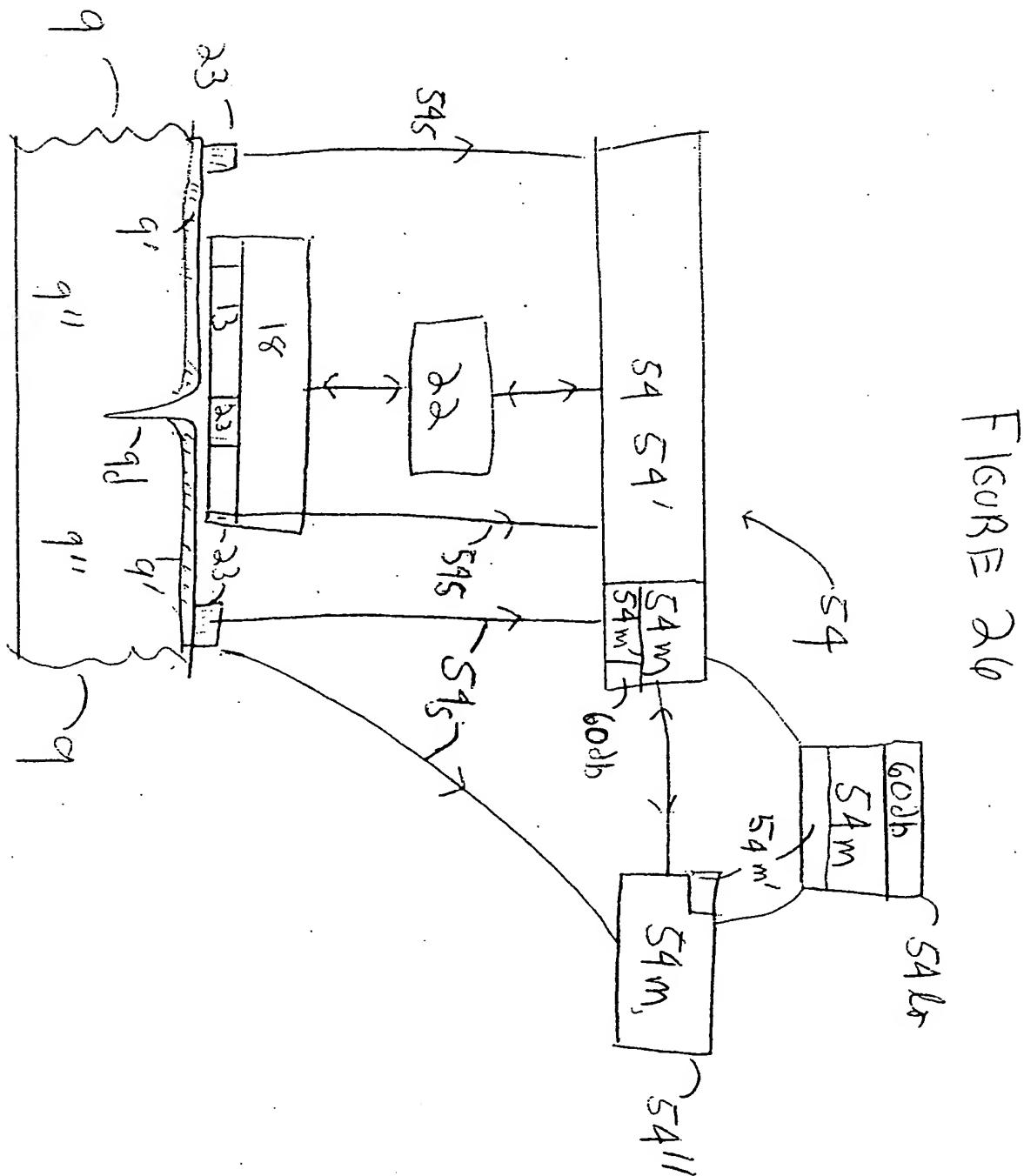
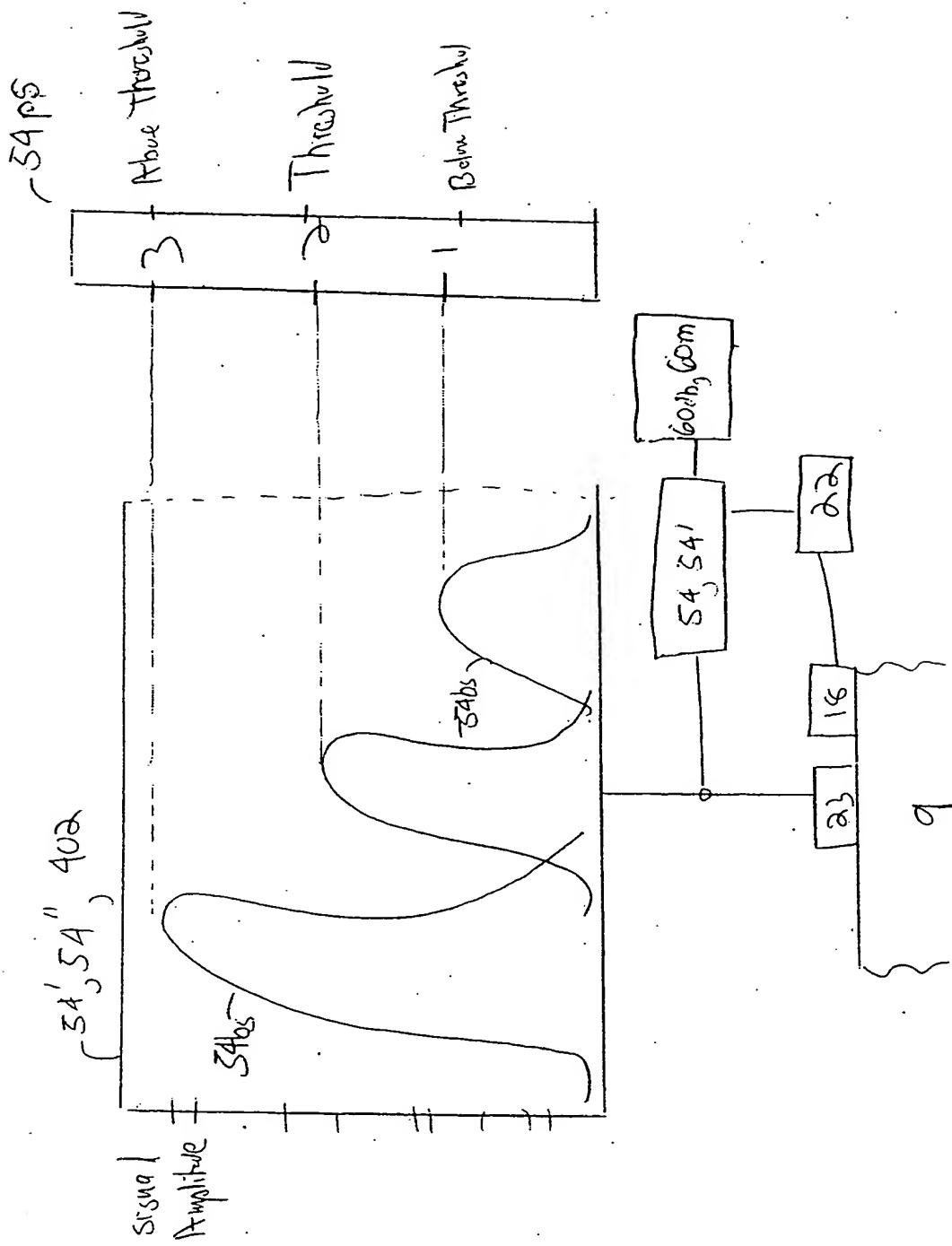


FIGURE 27



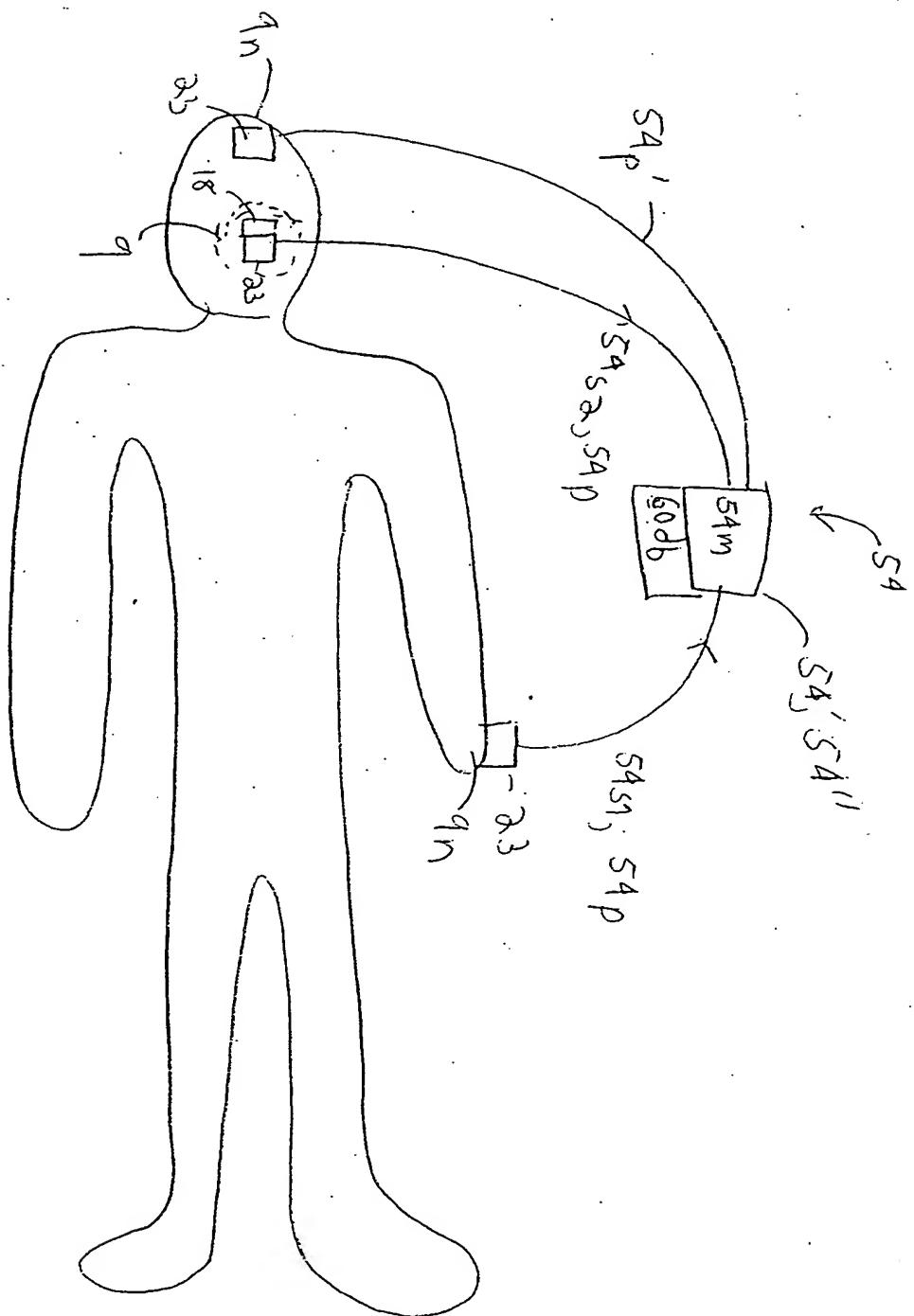


FIGURE 28

FIGURE 29C

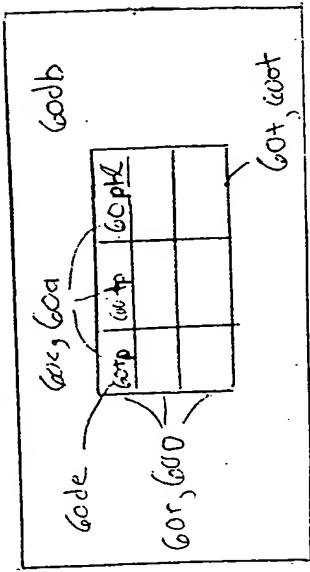
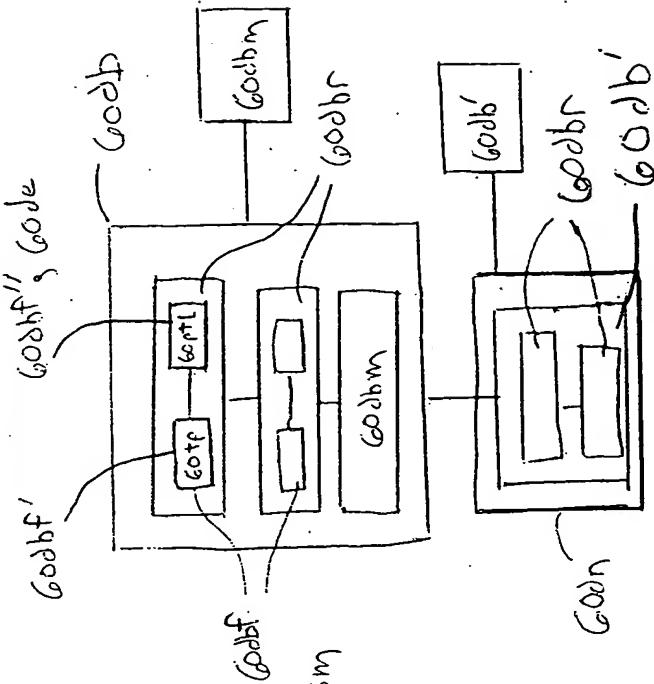
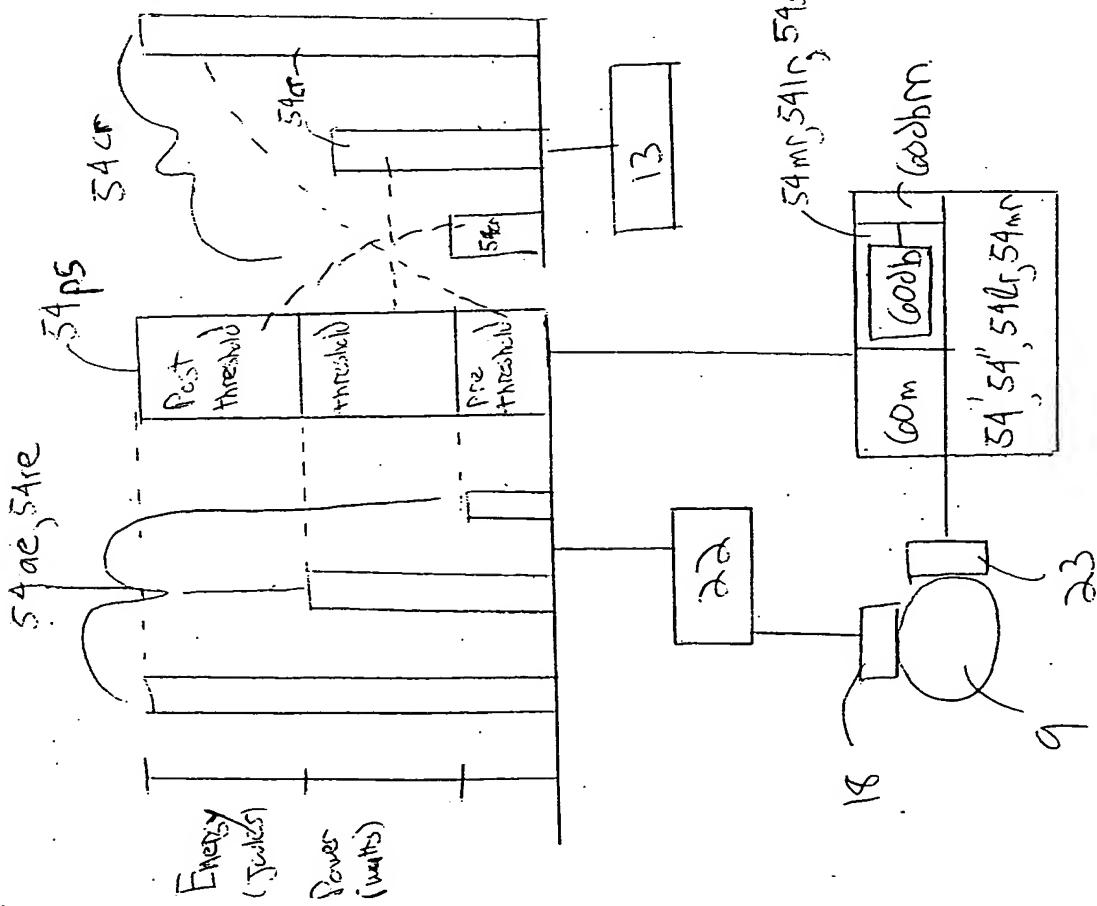


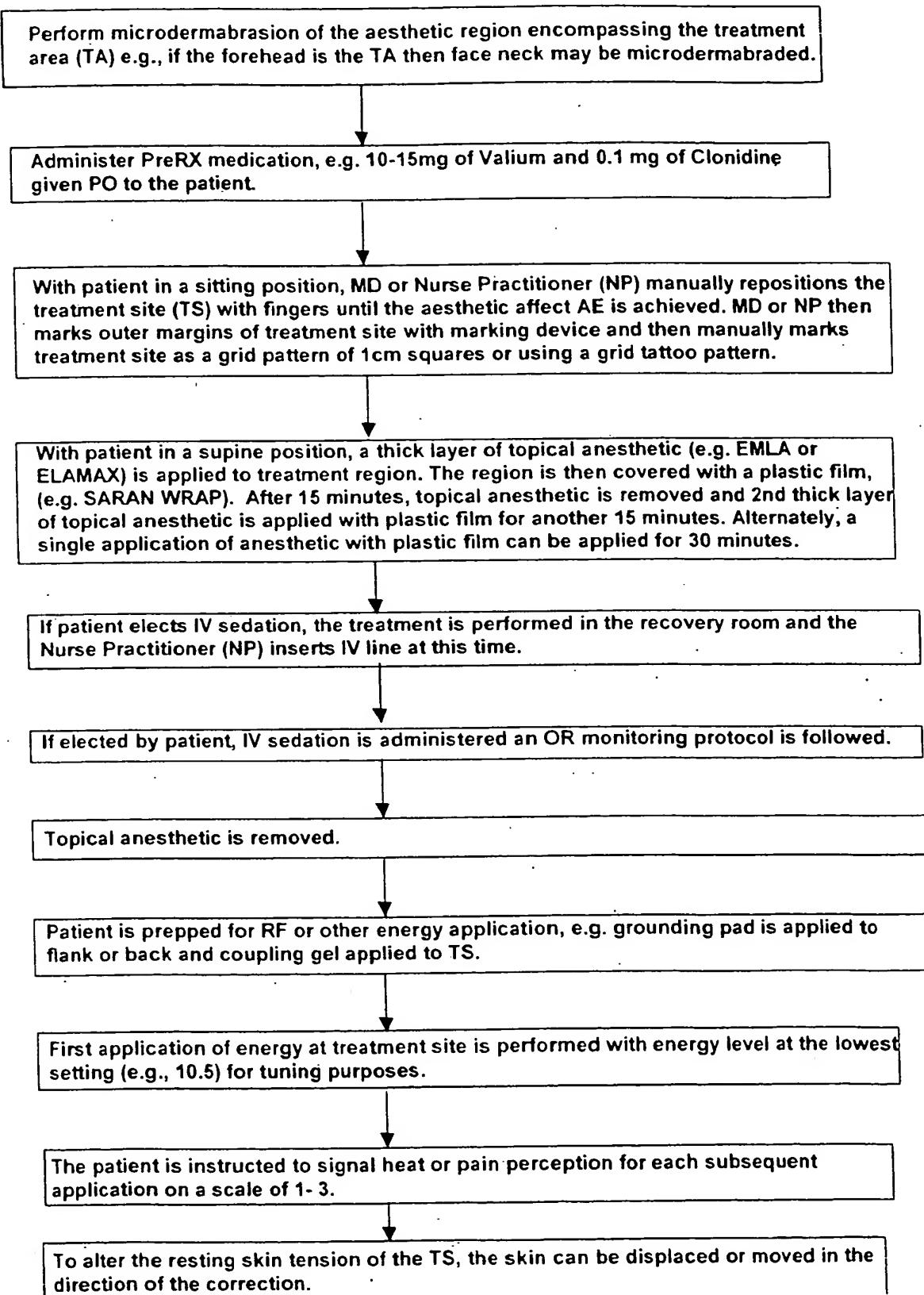
FIGURE 3a1b



## FIGURE 21d



**FIG. 30 Patient Treatment Algorithm Using A Topical Anesthetic**



### FIG. 30 Patient Treatment Algorithm, Continued

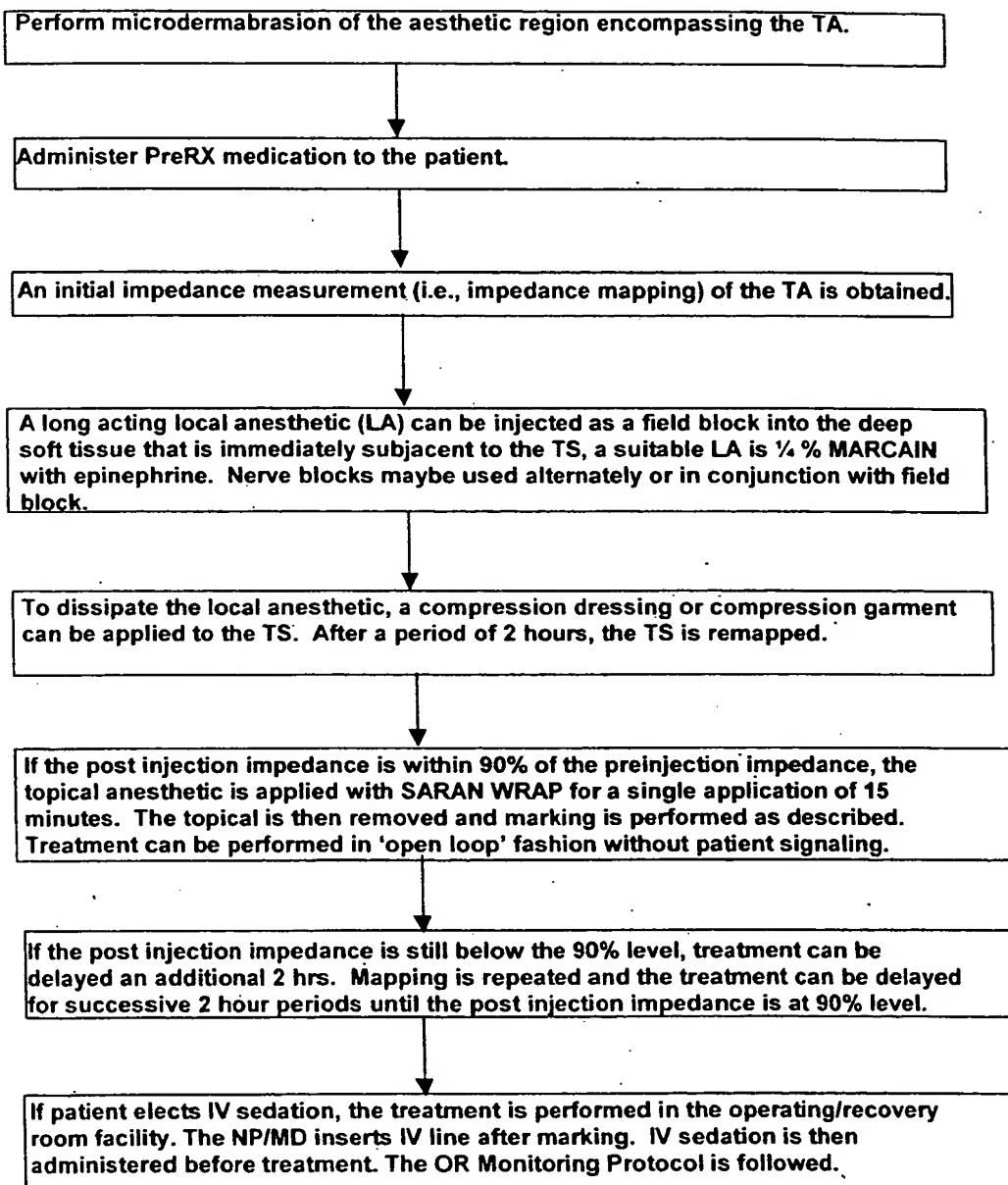
The next energy application can be started at energy level 11.0 and is applied to an adjacent grid site (all subsequent applications are applied to new adjacent grid sites). A ramp-up titration method can be used by increasing the energy level by 1 with each subsequent application until a perceived heat level of 2 is signaled by the patient. Subsequent applications can continue at that energy level until additional titration is needed because of a change in the perceived heat level by the patient. Those previous grid sites that were perceived as heat level 1 are marked with a dot in the center for re-treatment after the grid pattern is completed. Grid sites that do not exhibit erythema can also be retreated even though the patient previously signaled a level 2 at these sites.

If a heat level 3 is perceived by the patient, the energy level is reset one level lower until a heat level 2 is perceived by the patient. Subsequent applications can continue at that energy level until additional titration is needed because of a change in perceived heat level by the patient. No retreatment is needed for sites that are perceived at heat level 3.

**Additional Passes:** For under corrected areas, subsequent applications are administered to portions of a treatment site that was previously signaled as heat level 2.

Post treatment stenting of the treatment site can be performed to reduce resting skin tension and preserve primary dermal collagen contraction and also assist in secondary wound healing contraction. For example, the application of RESTON at the inferior of the breast coupled with wearing of a supportive bra may initially preserve and secondarily increase the elevation of the nipple areolar complex in breast ptosis patients.

**FIG. 31 Patient Treatment Algorithm Using An Injected Local Anesthetic**



## FIG. 32 Photographic/Visual Documentation Algorithm

A pretreatment photo/image of patient is taken sitting while orienting the patient's nasal tip at the intersection of vertical and horizontal lines of a grid background. The camera/imager viewfinder can be used to establish a sitting 'eye level' perspective of the patient.

The levels of the transverse canthal line (TCL) and the inferior outline of the chin (IOC) are recorded.

Align intersecting lines of grid background and viewfinder by moving camera/imager or attached support fixture (e.g.monopod) as needed.

When aligned, take pretreatment photo or image.

When taking a post treatment photo, the patient's head can be reoriented with the nasal tip at the center of the grid background intersection and the head tilted to the same pretreatment TCL & IOC.

The pretreatment photo/image can be pasted as a partial transparency over the post treatment photo. This can be also done digitally using an electronic photographic editor to superimpose the post treatment image over the pre-treatment image or vice versa.

Anatomic landmarks between the pre-treatment and the post-treatment photos/images (with the exception of those of the treatment site) can be aligned manually or digitally.

FIGURE 33A Pre. treatment

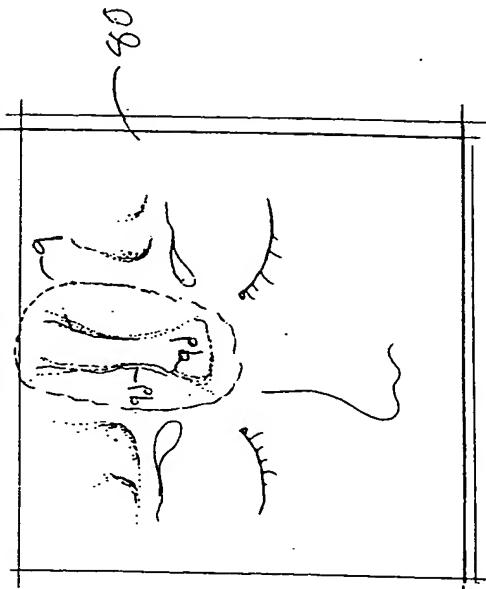


FIGURE 33B Post. treatment

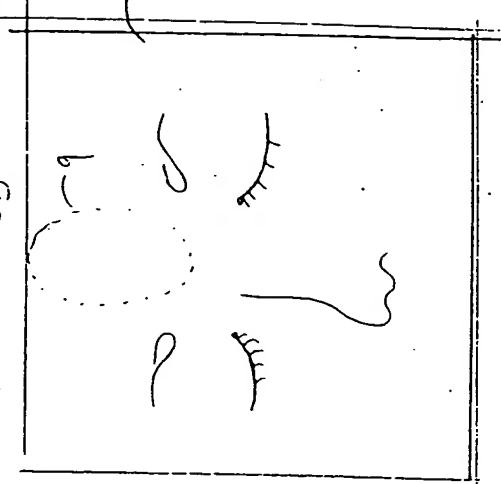


FIGURE 33C Superimposition of Images

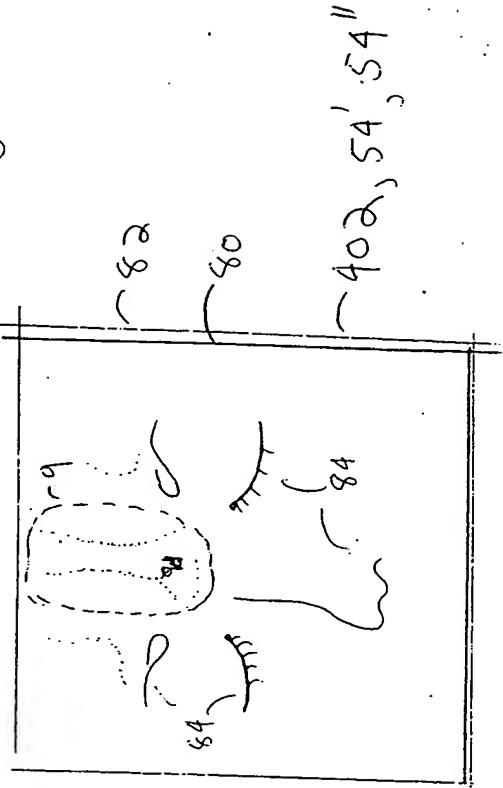


FIGURE 34

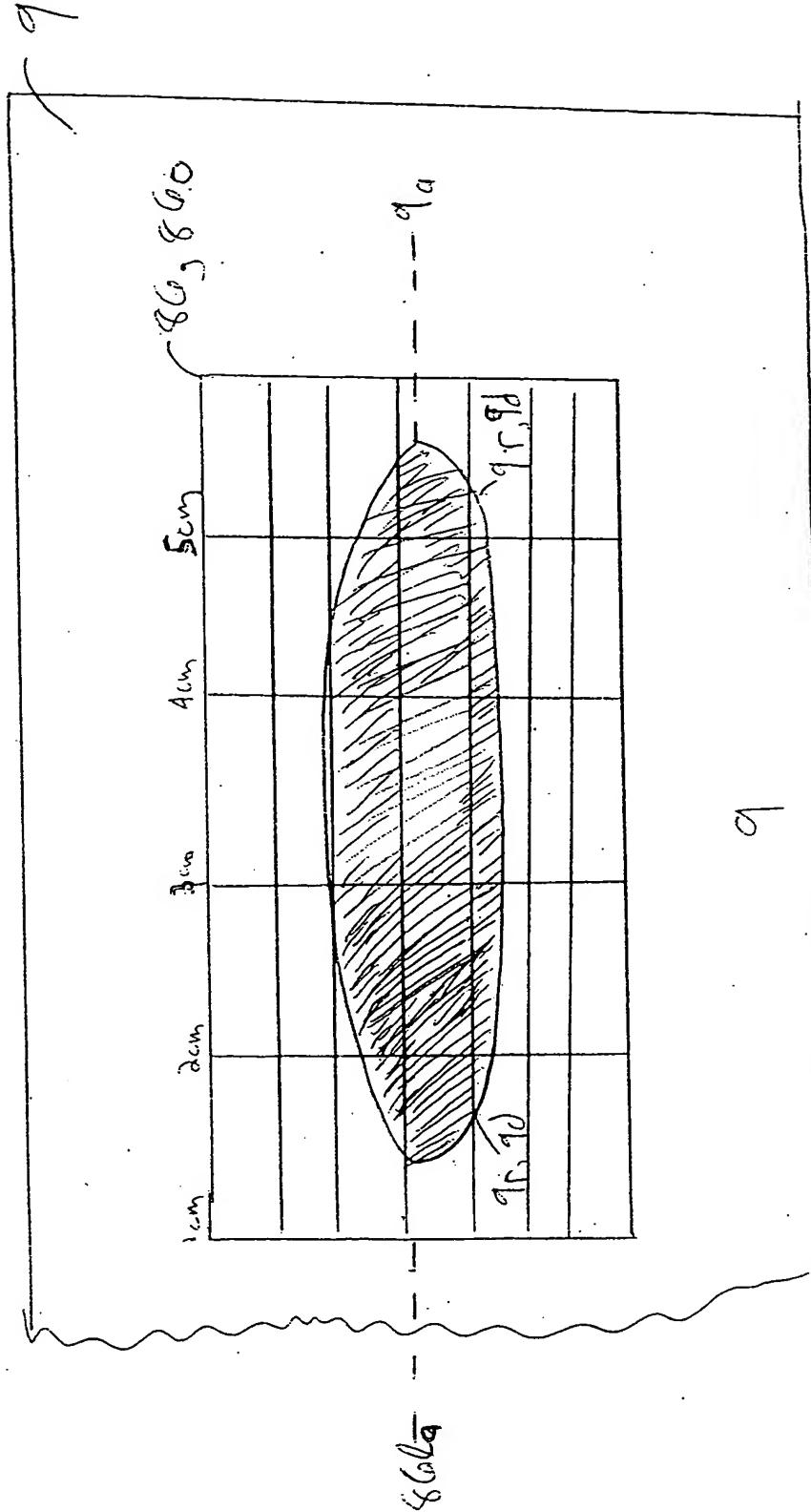
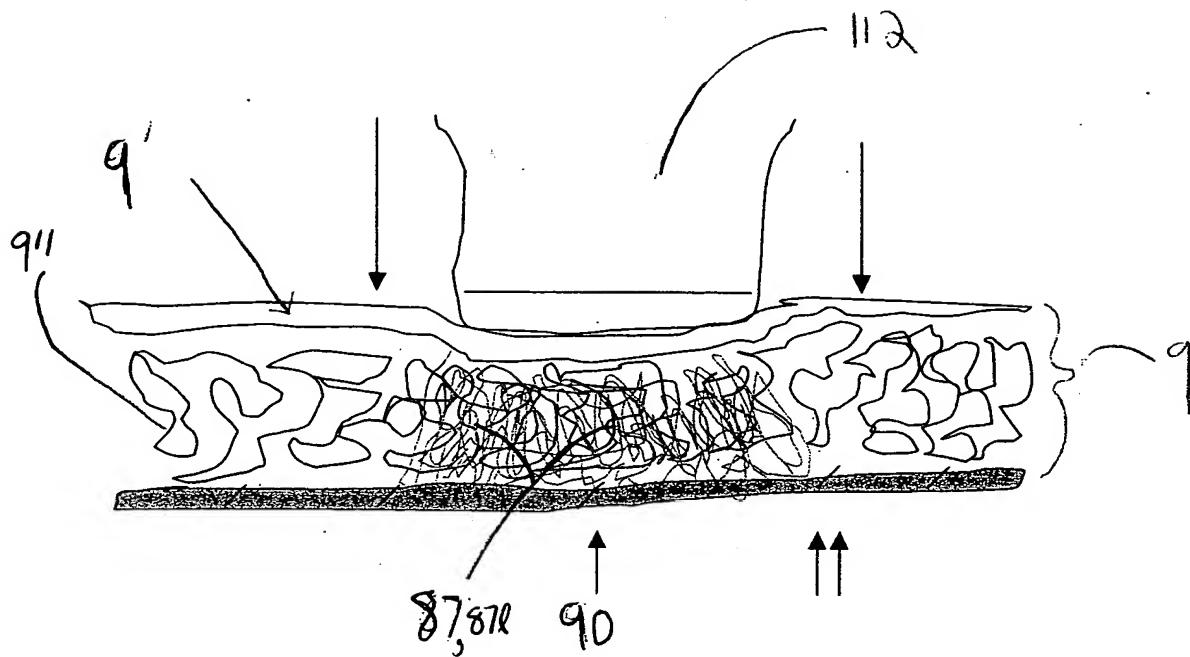
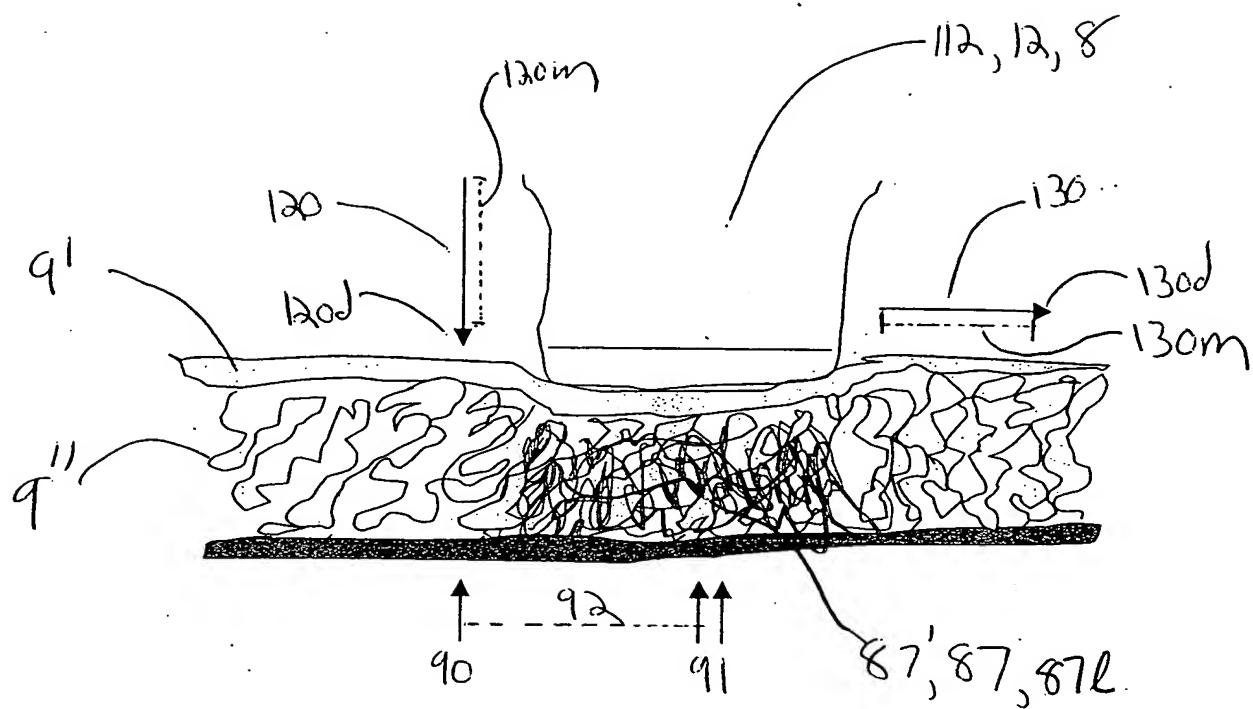


Figure 35



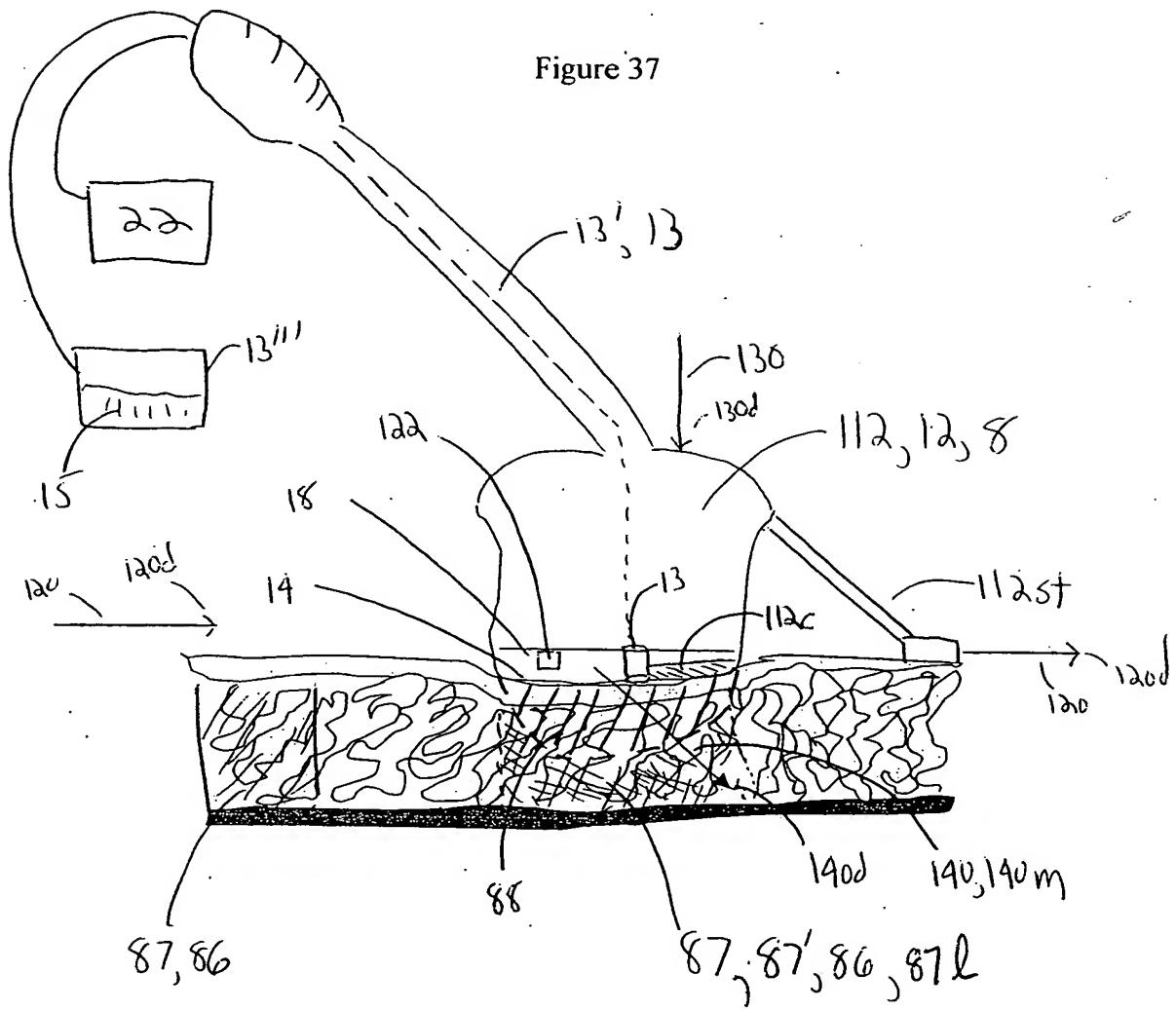
Without Vectored Thermoplasty where only compression is applied, the thermal adhesion is created at the single arrow, 90

Figure 36



With Vectored Thermoplasty where compression and tangential forces are applied, the thermal adhesion of the tissue is created at the double arrow, 91 in a more aesthetically corrected configuration.

Figure 37



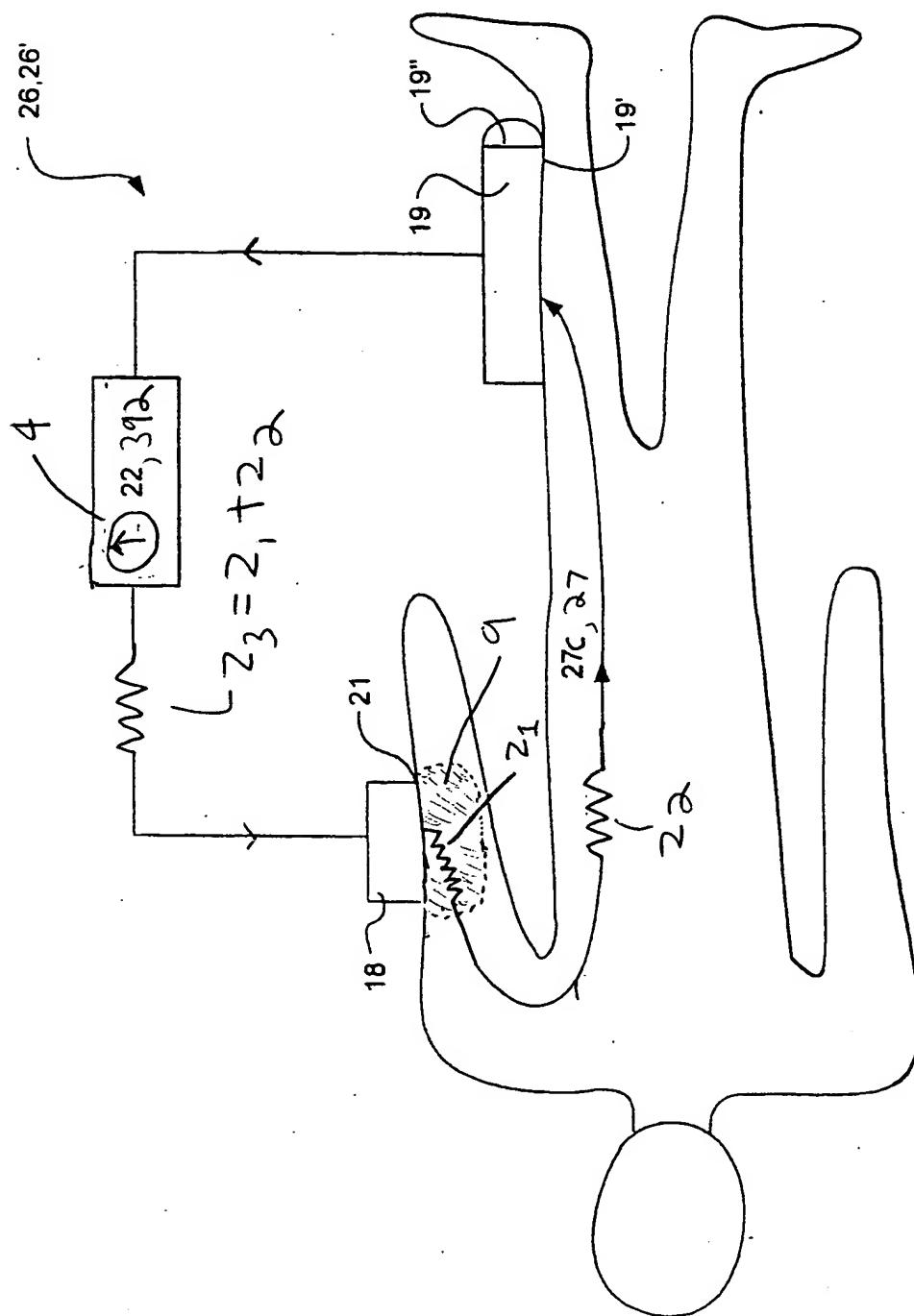


FIG. 38

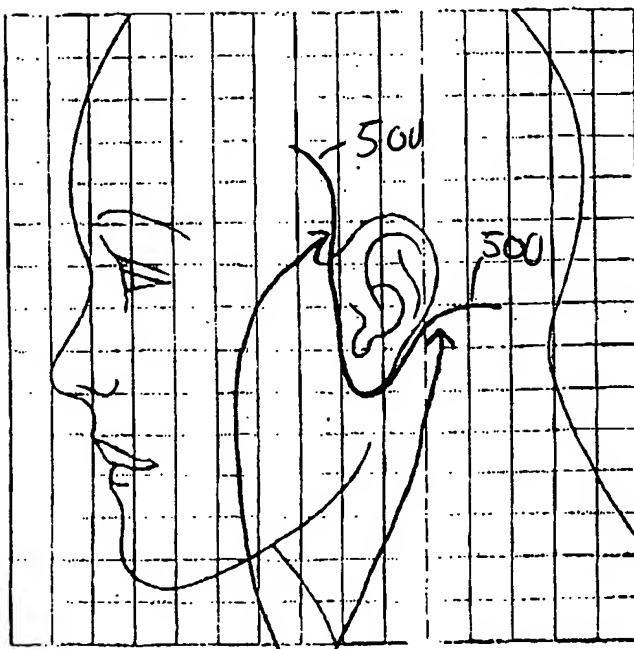


Figure 39a

Typical Facelift  
Incision, 500

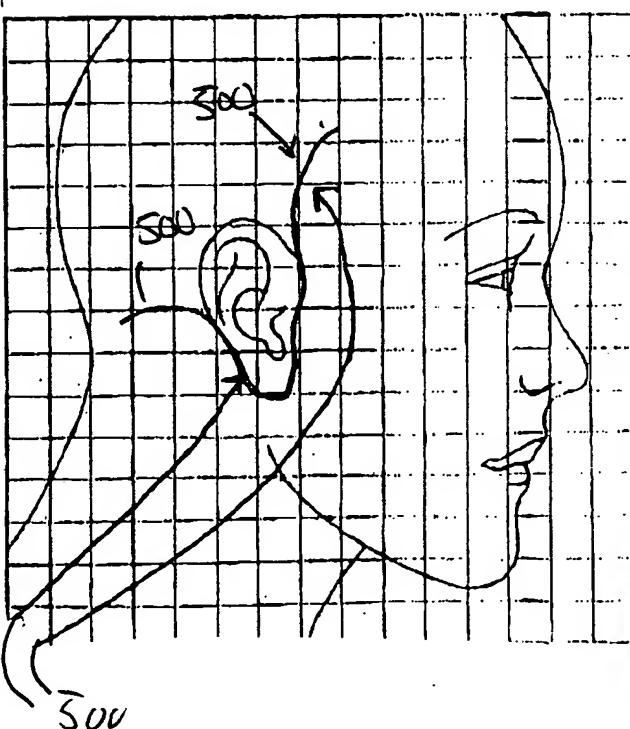


Figure 39b

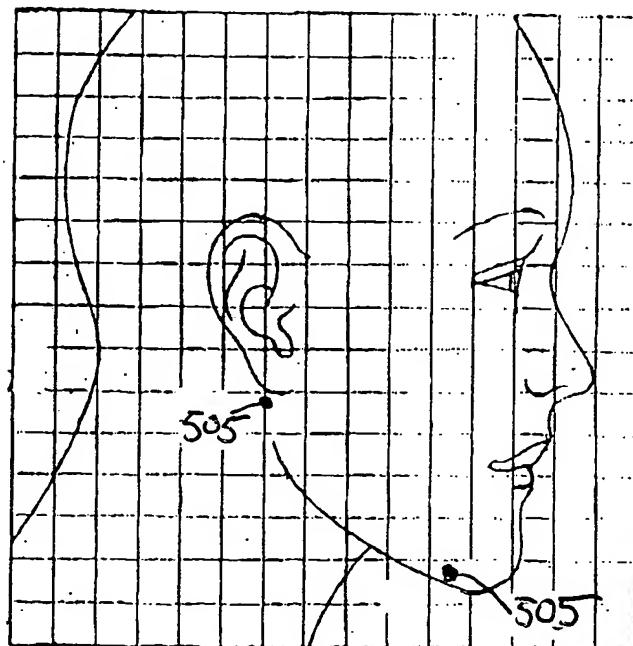
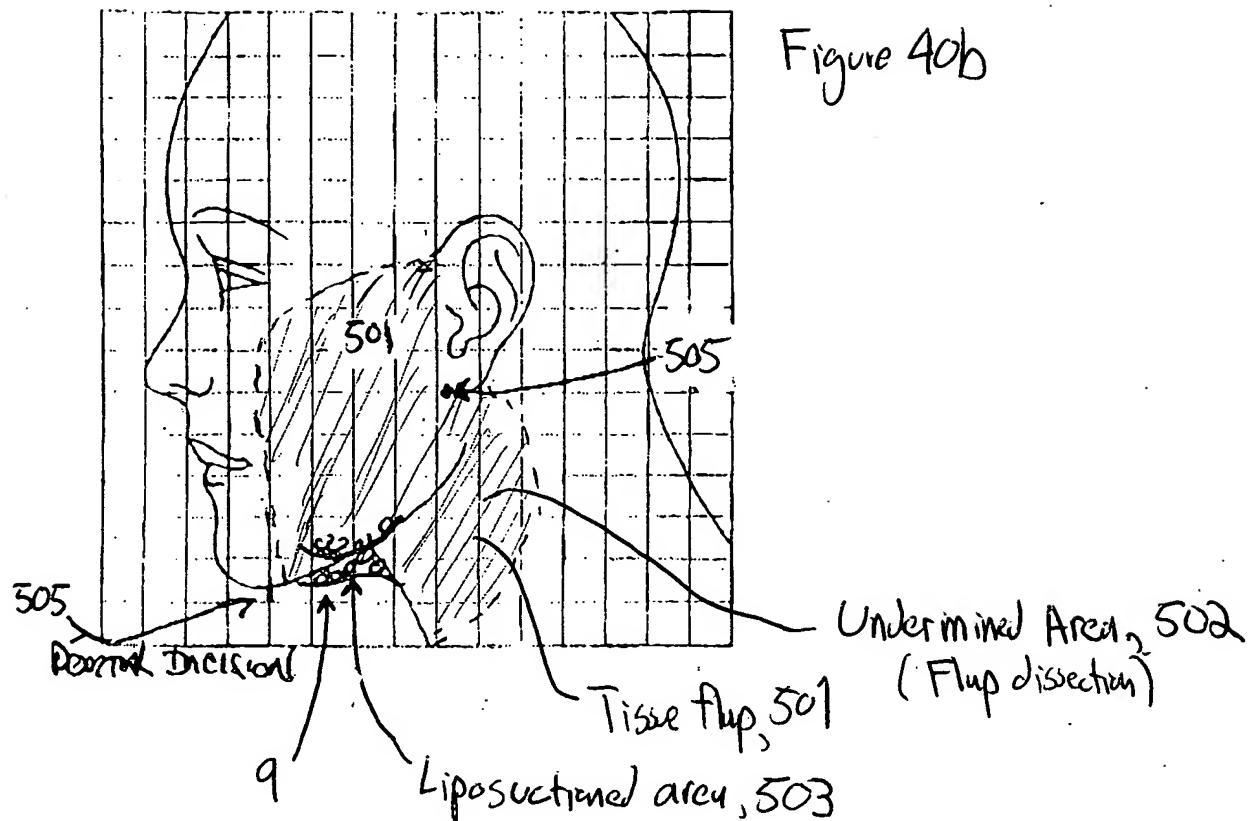


Figure 41a

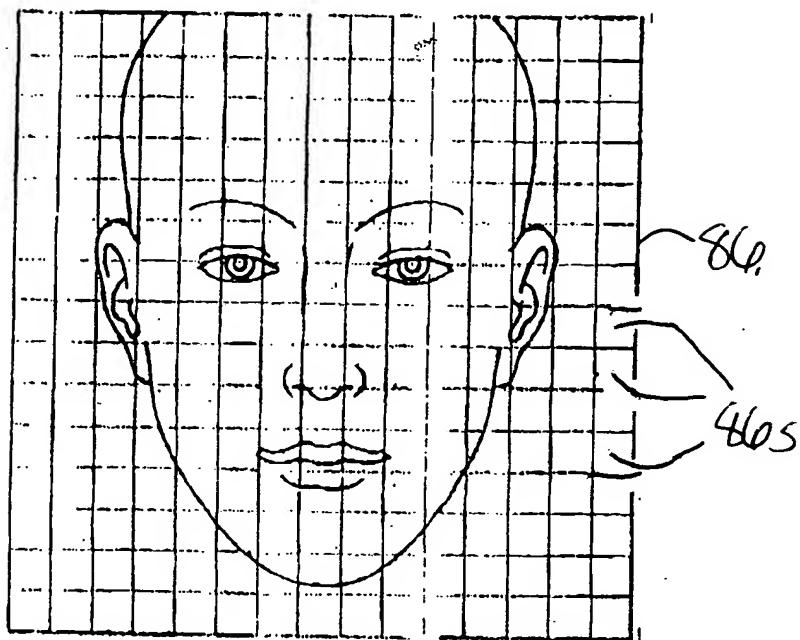


Figure 41b

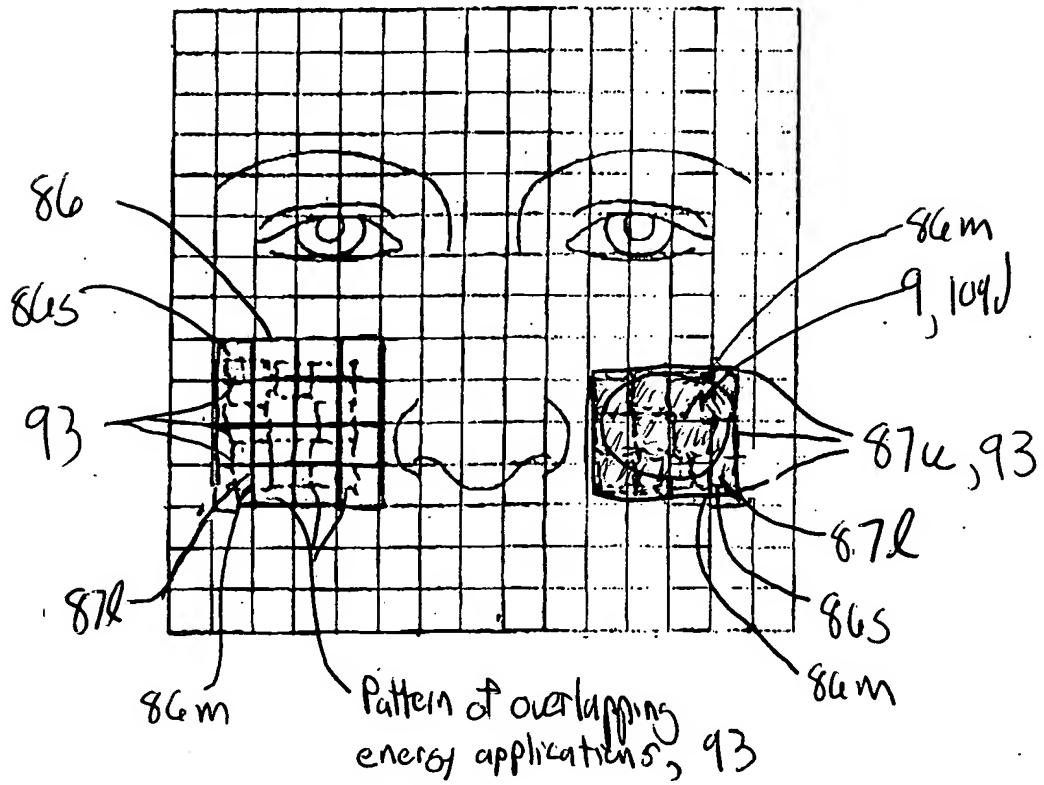


Figure 41c

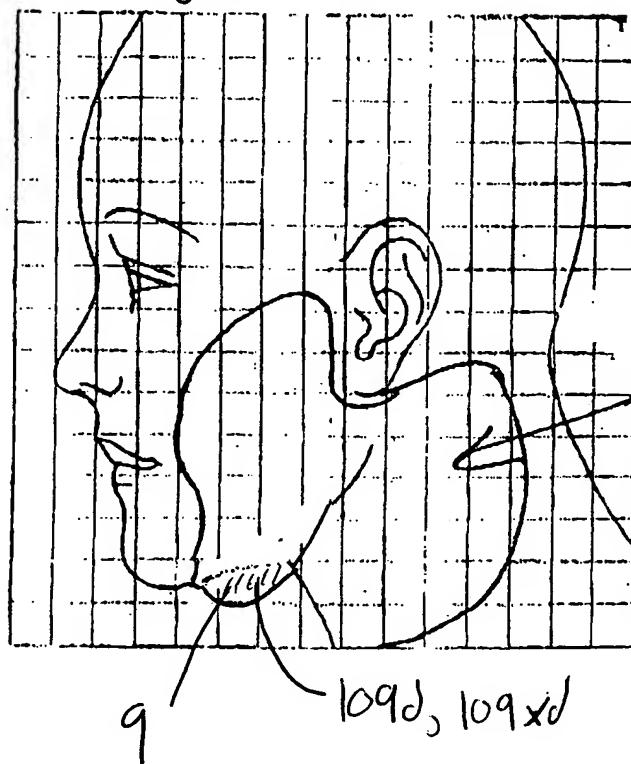


Figure 41d

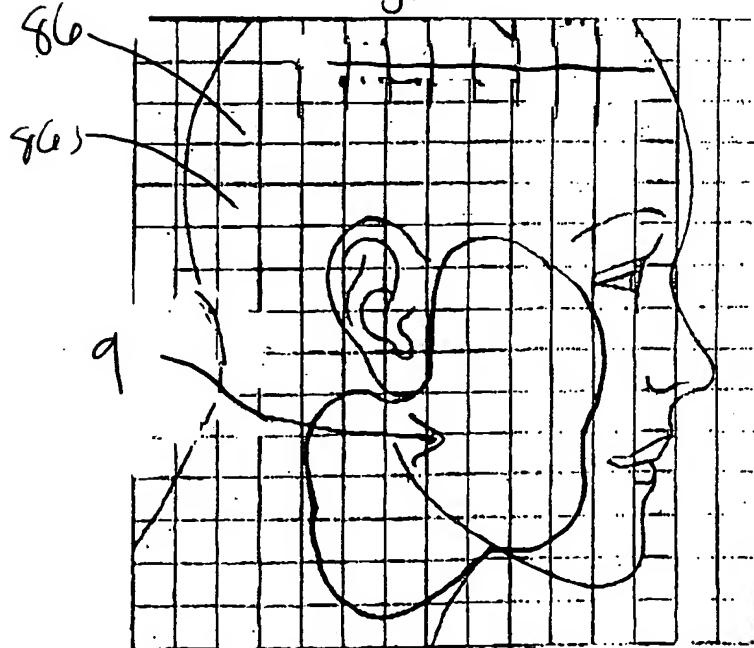


FIGURE 41e

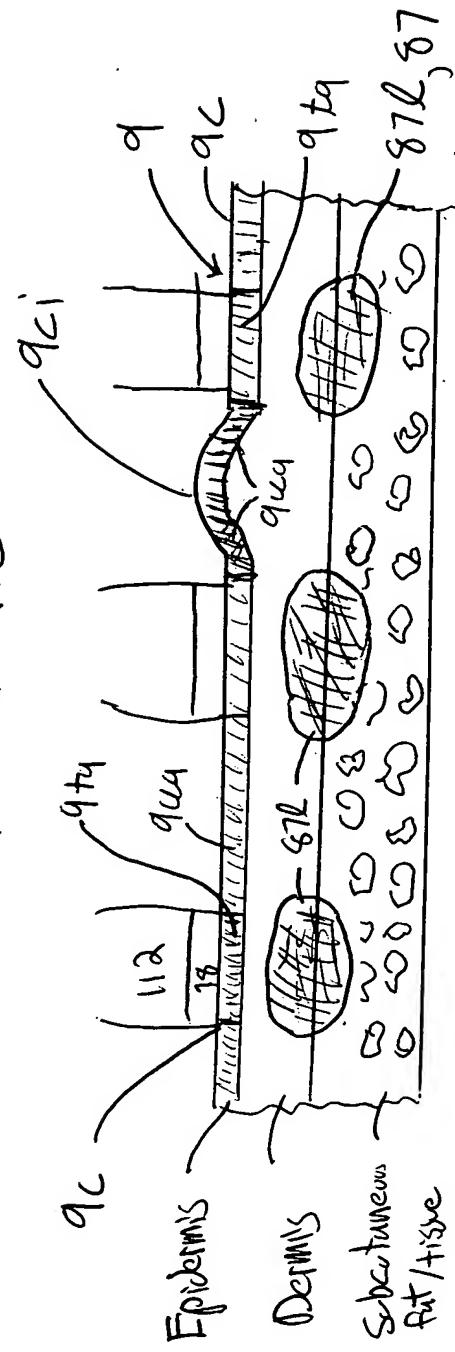
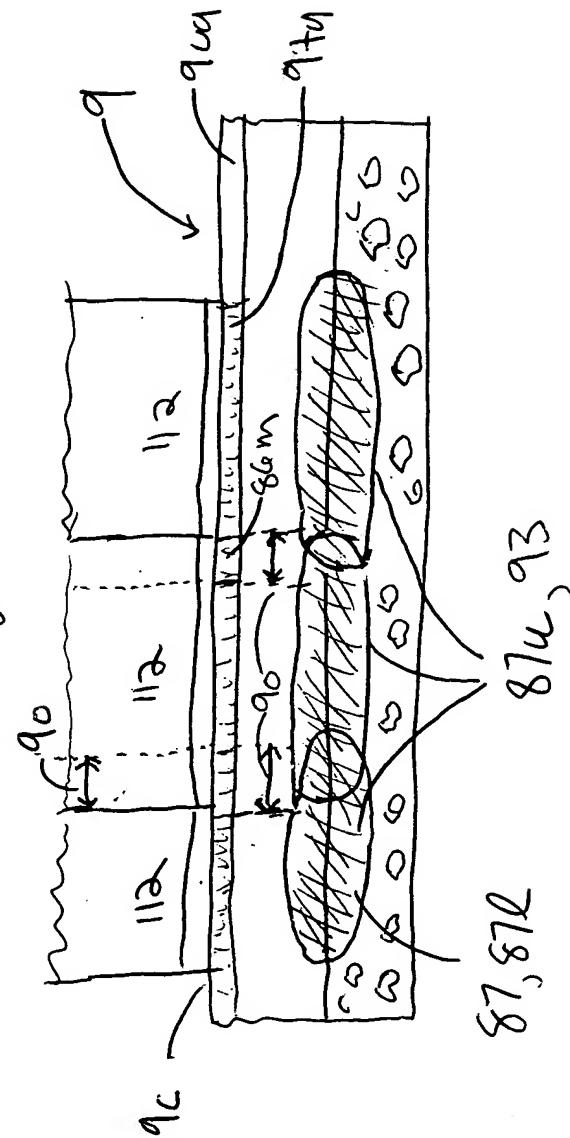


Figure 41f



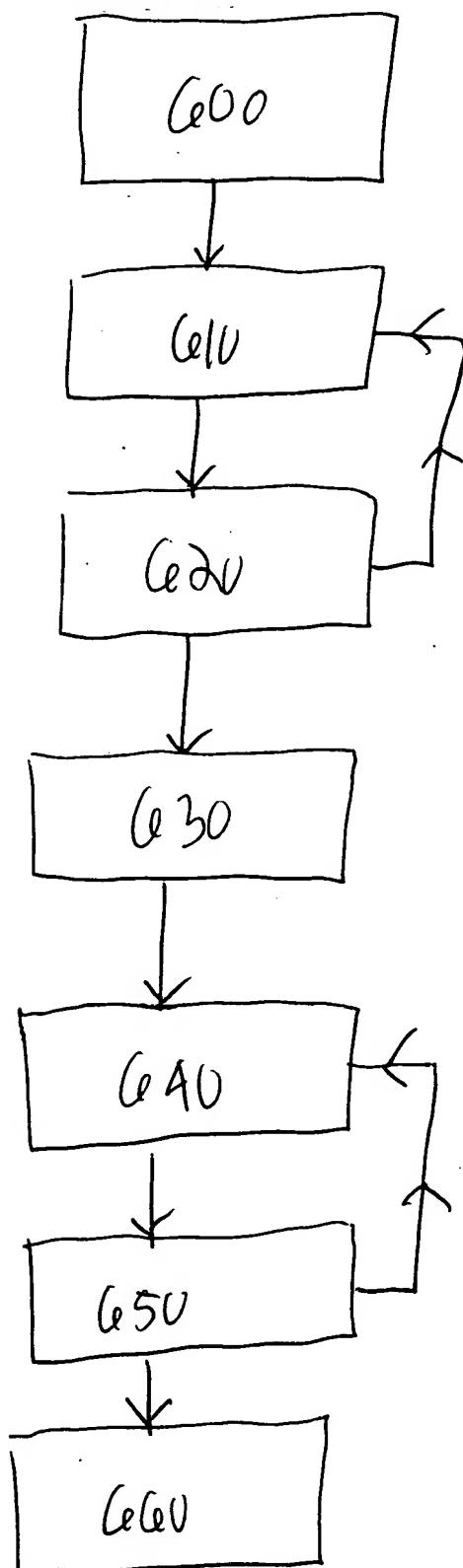


Figure 42

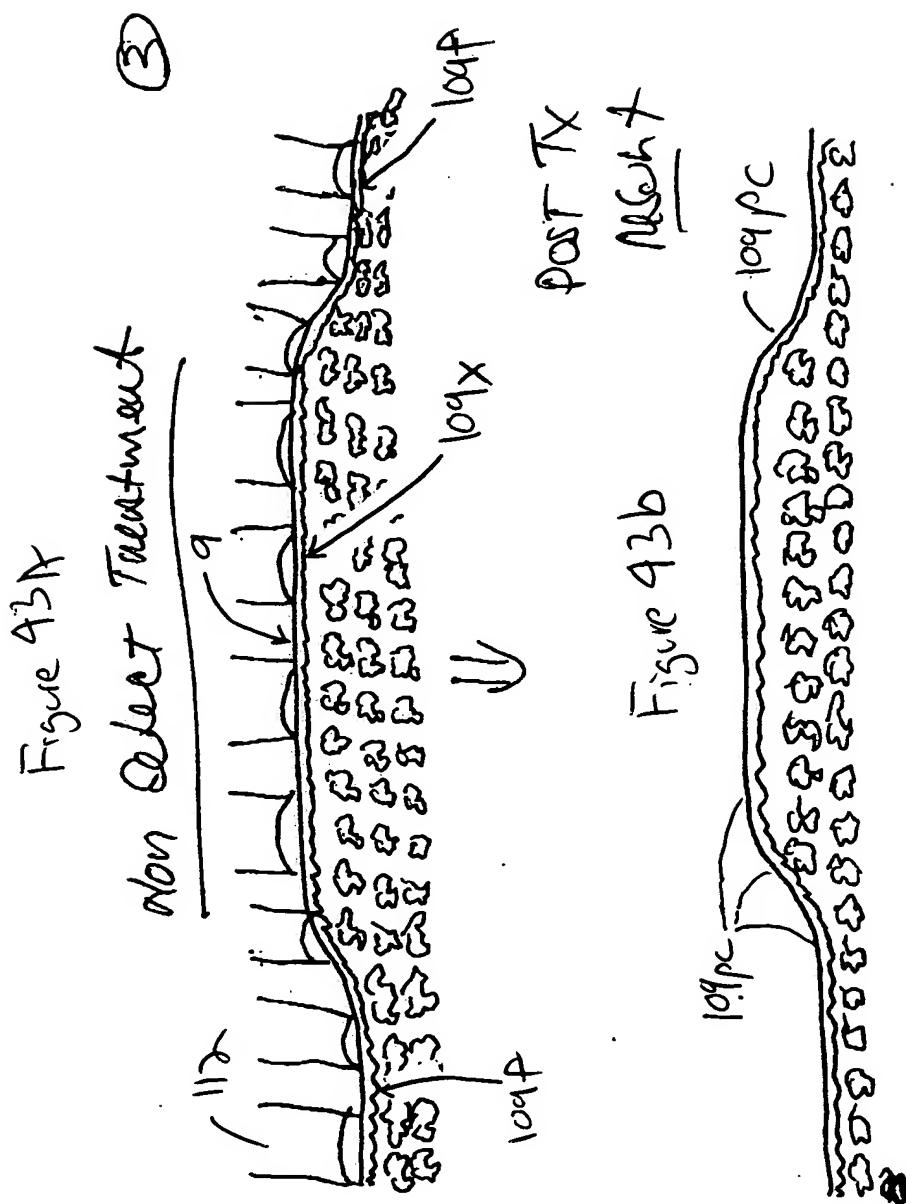


Figure 44

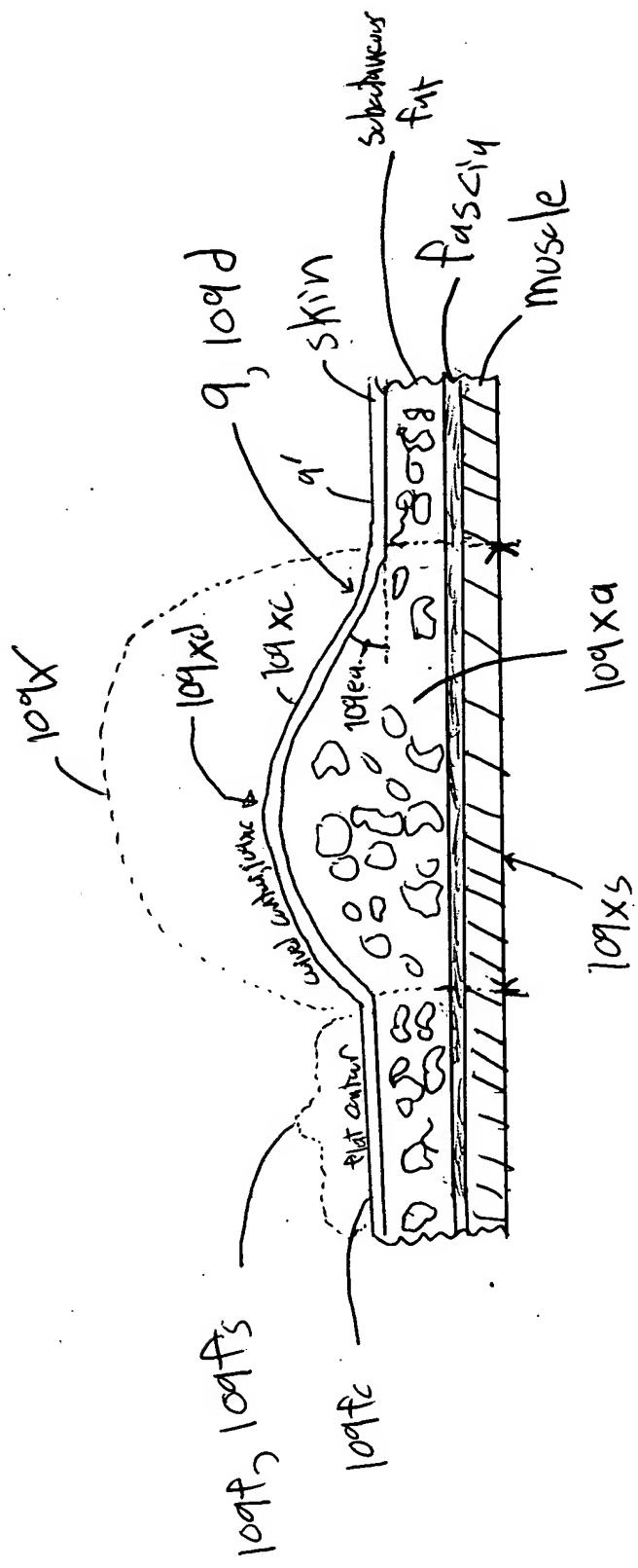


Figure 45q

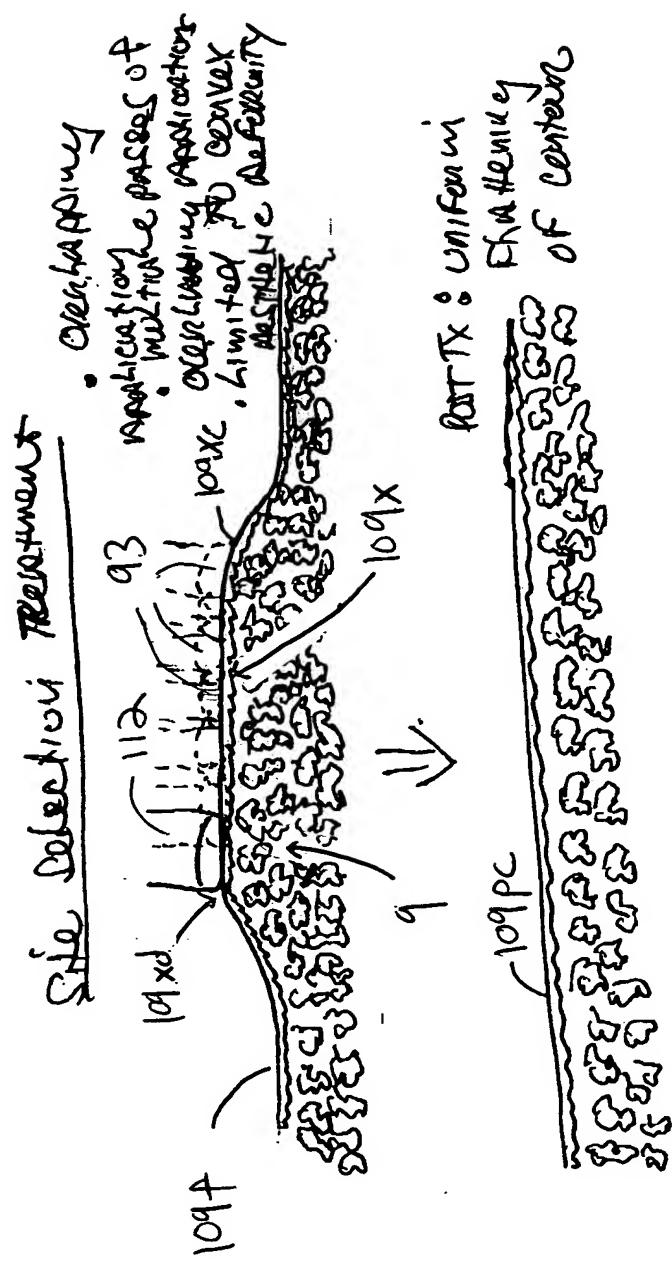


Figure A5.b

Figure 46

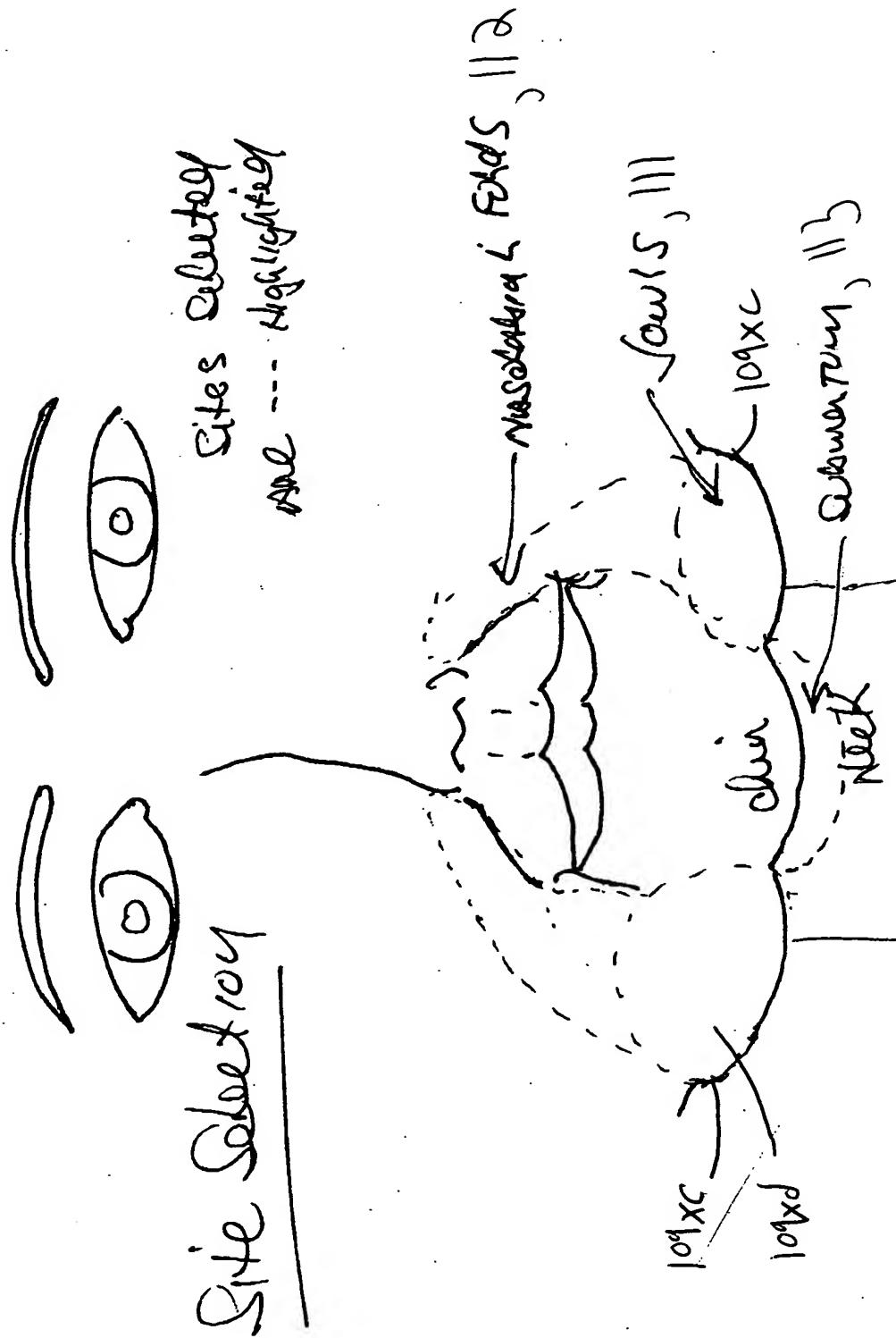


FIGURE 47

Eric Cobelt 104

File 3 - Classification

